

GREGORY LESSING GARRETT

CORONAPOCALYPSE

5G

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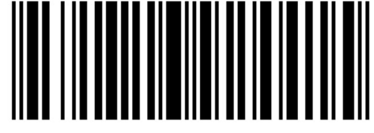
Before the COVID 19 Eugenics Project was launched by Club of Rome puppet Bill Gates, the Climate Change Hoax was implemented by The Club of Rome to manipulate the world into economic submission. It did not work, largely due to its ludicrous propositions and unsupported and unscientific claims, and so the Club of Rome created an Invisible Enemy in the form of a super virus to succeed where Climate Change had failed. Now that virus fear has spread worldwide so well, they can easily backtrack and swoop up and reassert the previously failed Climate Change Agenda in order to finalize the necessary fear required for worldwide tyranny.

Of course, this is all being processed through the conduit of the Luciferian Eugenics Philosophy of The United Nations, which is the vile and lethal stepchild of the Club of Rome, both parent and stepchild subservient to the goals and admonishments of Lucis Trust Publications.

GREGORY LESSING GARRETT



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CoronApocalypse

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Printed in the United States of America

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First Printing, 2020

ISBN: 979-8-65439-773-7

Introduction

5G Activated Nanotech is C 19

This is scientific research from my recent book, not speculations replete with wild assumptive assertions. I ask you to think scientifically with me, now. Lay your emotions aside. My research, which I have exhaustively presented in my last book, The Invisible Enemy, including peer reviewed medical abstracts and references, suggests that:

5G Activated Nanotech is C 19

Nanotech is used to lock on to 5G and is essentially activated by 5G. Quite possibly, the nano tech delivery system is Chemtrails, as well as Vaccinations. Correspondingly, the ventilator calibrations we are seeing used with alleged C 19 patients are concurrent with what we see used with Acute Hypoxemic Respiratory Failure and NOT CV related Pneumonia or Influenza. In other words, 5G EMF driven Hypoxia related Thrombosis, leading to Acute Hypoxemic Respiratory Failure, is actually what we are seeing in alleged C 19 patients, which is immune system related and not virally contagious.

5G Disruption of the Bond Angle of Oxygen Molecule Electrons and Hypoxia related Thrombosis:

Another form of electromagnetic radiation is Wi-Fi. Wi-Fi driven cellphones have been proven to be unhealthy, long term, in countless scientific papers on the long-term effects of electromagnetic radiation and the human immune system. What about the 5G network? Obviously, 5G is a form of EMF but a quite different form, using different frequencies and energies than its more amicable predecessors, 2G, 3G, and 4G. 5G does not have a long range and is blocked by physical objects.

5G needs to be boosted at regular distances and is known to interfere with oxygen molecules in the water inside the human body. 5G interferes with

the bond angle of oxygen molecules in water. The one lone electron exerts a less repulsion than normal on the two bonding oxygen atoms, so they can spread out more to a 134 degrees bond angle from the ideal of 120 degrees. All oxygen atoms have an octet of electrons.

In stands to reason that any deformation of bond angle or electron sharing of molecules could interfere with hemoglobin transport. Just imagine what it could do at the atomic level of a person's hemoglobin transport system. It could literally suffocate a person by depriving their lungs of precious oxygen molecules through excessive ***Oxidative Stress**.

Oxidative Stress contributes to many pathological conditions and diseases, including cancer, neurological disorders, atherosclerosis, hypertension, ischemia/perfusion, diabetes, acute respiratory distress syndrome, idiopathic pulmonary fibrosis, chronic obstructive pulmonary disease, and asthma.

China launched the world's largest 5G network in October 2019. Some researchers into the relationship between 5G and Immunology have put forth the claim that 5G damages the immune system, leaving affected individuals highly exposed to the disease. They allege that 5G mobile networks are being deployed in high frequency bands of up to 60 GHz, thus causing ionization of the oxygen molecules in the air. This process potentially splits the molecular electron bonds which then deprives the human body of oxygen, causing Hypoxia related Thrombosis, stroke, and death if prolonged.

Acute Hypoxemic Respiratory Failure:

Acute hypoxemic respiratory failure is severe arterial hypoxemia that is refractory to supplemental oxygen. It is caused by intrapulmonary shunting of blood resulting from airspace filling or collapse (e.g., pulmonary edema due to left ventricular failure, acute respiratory distress syndrome) or by intracardiac shunting of blood from the right- to left-sided circulation. Findings include dyspnea and tachypnea. Diagnosis is by arterial blood gas measurement and chest x-ray. Treatment usually requires mechanical ventilation.

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Hypoxemic Respiratory Failure and NOT CV related Pneumonia or Influenza. In other words, 5G EMF driven Hypoxia related Thrombosis, leading to Acute Hypoxemic Respiratory Failure, is actually what we are seeing in alleged C 19 patients.

The Jesuit Shadow Empire and The Invisible Enemy

The Copernican Revolution, with its Heliocentric Deception, was merely a steppingstone leading to the current Plandemic Eugenics Agenda. By removing God from the equation through fabricating an Evolutionary Hoax, based upon a random, chaotic Universe design, where Mankind is reduced to an insignificant, unessential, unloved creature, and under the gun of blind merciless fate, the Jesuit Vatican military order was able to prepare the way for an equally devastating deception:

The Invisible Enemy

An Invisible Enemy exists which will kill everyone who does not submit to Jesuit Vatican Technocratic Despotism. Their emissaries, Bill Gates, Dr, Anthony Fauci, Neil Ferguson, and Deborah Birx are puppets on a Jesuit string, put in place to finalize the Jesuit Eugenics Agenda, which flows back many decades through history.

Nevertheless, The Invisible Enemy is not any kind of virus. The Invisible Enemy is the Jesuit Vatican Shadow Empire that has governed the world from behind the scenes though a network of mystery schools and secret societies for centuries.

The Ruling Technocratic Elite learned a long time ago that ruling through brute force was too costly, too transparent, and too difficult to sustain. And so, they decided to become the guardians and protectorates of society,

deferring to psychological manipulation, calculated propaganda, divide and conquer strategies, and mind control media programming to pacify the masses and garner their trust. Additionally, through the implementation of soft kill techniques such as poisoned food supplies, fluoridated water supplies, chemicals in the environment, electromagnetic radiation everywhere, and lethal bacterial toxins in the air they achieved remarkable success in increasing the mortality rate of anyone even slightly susceptible to illness from age and/or a compromised immune system.

We are actually at a crossroads here, where the destiny of the world can be taken back into our hands if we push back, or be lost to the hands of the Technocratic Elite, who are planning to exterminate over 90% of the humane species. The Real Invisible Enemy is a Luciferian Cult that goes back to Mystery Babylon. It is an ancient Luciferian Cabal, infected with a Posthuman and Transhuman Agenda, where they seek to evolve into a type of Nano Synthetic or Holographic Artificial Intelligence, All Powerful and Immortal.

Indeed, their agenda is to Storm Heaven and become God.

In the form of a network of Secret Societies and Occult Mystery Schools, these Luciferians have been steering the world from behind the scenes for thousands of years. Finally, they have reached the "End of Days" of their ancient agenda and are currently lowering the capstone on top of their "Great Work of the Ages":

Installing the Digital Technocratic Beast System

Climate Change and the Jesuit Created Club of Rome

Anyone who bothers to do some research will disC 19er that climate change, as presented to us by the self-elected political gods of the Club of Rome, is a fraud. It was developed in its latest incarnation by the Club of Rome (see their own documents) to generate a fictitious threat to humanity for purposes related to creating a more manageable constituency.

Problem-Reaction-Solution: The Hegelian Dialectic in action

After their eugenics policies are implemented, they would like to turn what's left of humanity into a feudalistic society with their Luciferian religion at the helm. Anyone can easily fact check this by reading the documentation coming out of the United Nations under the heading "Lucis Trust" (Changed from Lucifer Publishing Company for obvious reasons…).

Even the Jesuit Created United Nations' Resource, *Lucis Trust*, Admits This:

"When Alice and Foster Bailey were beginning to publish the books published under her name, they named their fledgling publishing company "Lucifer Publishing Company". By 1925 the name was changed to Lucis Publishing Company and has remained so ever since. Both "Lucifer" and "Lucis" come from the same word root, lucis being the Latin generative case meaning of light. The Baileys' reasons for choosing the original name are not known to us, but we can only surmise that they, like the great teacher H.P. Blavatsky, for whom they had enormous respect, sought to elicit a deeper

understanding of the sacrifice made by Lucifer. Alice and Foster Bailey were serious students and teachers of Theosophy, a spiritual tradition which views Lucifer as one of the solar Angels, those advanced Beings Who Theosophy says descended (thus "the fall") from Venus to our planet eons ago to bring the principle of mind to what was then animal-man. In the theosophical perspective, the descent of these solar Angels was not a fall into sin or disgrace but rather an act of great sacrifice, as is suggested in the name "Lucifer" which means light-bearer."

--Lucis Trust Website

New Boss Same as the Old Boss: Repackaging the Eugenics Project as C 19

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"Through the worldwide lockdown, less people have been driving, thereby decreasing our Carbon Footprint, and less people have been polluting the environment by working, and so we want the "new normal" to be lockdown and unemployment…to save the environment and save GAIA, our beloved Mother Earth."

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The Year of Jubilee

The Year of Jubilee, which came every 50th year, was a year full of releasing people from their debts, releasing all slaves, and returning property to who owned it (Leviticus 25:1-13). This year was also dedicated to rest. During this year, the Israelites were not supposed to reap or harvest; it was a time for people to return to their families and loved ones.

Ok, so is it the Biblical Year of Jubilee?

- Stimulus package, workers released, rent and mortgage forgiveness=Check
- Farming and food industry virtually paralyzed by lockdown=Check
- Lockdown keeping families and loved ones together=Check
- Everyone home resting instead of working=Check

Definitions

The Real Invisible Enemy

The Real Invisible Enemy is not a virus.

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Installing the Digital Technocratic Beast System

Using occult-based science, they have constructed a Scientific Dictatorship which will transform all the world into a Hive Mind Borg entity, rendering each individual person as a digital node in a vast, interconnected, Posthuman neural network of cybernetic slaves in a virtual and augmented reality.

This fake virus scare is providing the perfect excuse for advancing the 5G rollout under the radar, like a kind of diversionary tactic, and acting as a scapegoat for the worldwide toxic chemicals and EMF radiation which are damaging us long-term all the time.

There is no killer virus other than a killer Radiation Sickness.

Keep the Masses Ignorant to Keep them Enslaved

If you are spending more and more time with your home computer, television, and cell phone these days, you should understand how easy it was for them to achieve this using fear, propaganda, and decades of medical misinformation.

mRNA Vaccines

mRNA vaccines have **ALLEGEDLY** elicited potent immunity against infectious disease targets in animal models of influenza virus, Zika virus, rabies virus and others, especially in recent years, using lipid-encapsulated or naked forms of sequence-optimized mRNA. This strategy literary changes the genetic code of the DNA in Epigenetic real time.

Epigenetics

Epigenetic changes alter the physical structure of DNA. One example of an epigenetic change is DNA methylation, the addition of a methyl group, or a "chemical cap," to part of the DNA molecule, which prevents certain genes from being expressed. n its modern sense, epigenetics is the term used to describe inheritance by mechanisms other than through the DNA sequence of genes. It works through chemical tags added to chromosomes that in effect switch genes on or off.

Synthetic Nano Tech Infused mRNA Vaccines

The mRNA vaccines basically mimic the natural infection of the virus, but they contain only a short synthetic version of the viral mRNA which encodes only the antigen protein. Since the mRNA used in vaccination cannot become part of the person's chromosomes, they are safe to use. Such mRNA vaccines would also be safer than the weakened viral or protein-based vaccines because they do not carry the risk of the injected virus becoming active, or a protein contamination.

Vaccine Nanotechnology

The present invention provides compositions and systems for delivery of nanocarriers to cells of the immune system. The invention provides vaccine nanocarriers capable of stimulating an immune response in T cells and/or B cells, in some embodiments, comprising at least one immunomodulatory agent, and optionally comprising at last one targeting moiety and optionally at least one immunostimulatory agent. The invention provides pharmaceutical compositions comprising inventive vaccine nanocarriers. The present invention provides methods of designing, manufacturing, and using inventive vaccine nanocarriers and pharmaceutical compositions thereof. The invention provides methods of prophylaxis and/or treatment of diseases, disorders, and conditions comprising administering at least one inventive vaccine nanocarrier to a subject in need thereof.

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https://patents.google.com/patent/US9539210B2/en

5G Activated Nanotech is C 19

Whenever I use the term, "C 19", I mean 5G EMF Radiation, which when coupled with Metallurgical Chemtrail pollution, creates Radiation Sickness by over stressing the human body's respiratory system, creating oxidative stress, and provoking the body's natural immune system to over manufacture secretions of exosomes (viruses) to protect itself.

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Superstition

A superstition is any belief or practice based upon one's trust in luck or other irrational, unscientific, or supernatural forces. Often, it arises from ignorance, a misunderstanding of science or causality, a belief in fate or magic, or fear of that which is unknown.

"The most dangerous man to any government is the man who is able to think things out for himself, without regard to the prevailing superstitions and taboos."

— Henry L. Mencken (1880-1956) American journalist editor & satiris

The Corona Carnival

Want to stop the CV Pandemic? Just turn off your television, walk outside, and take a hike on any country road. It disappears into the mist just like the illusion that it is. There is no virus…just economic collapse that is being C 19ered up by the fake Pandemic.

Philanthropy

Westerners owe the word “Philanthropy” to the Greeks, who, since the fifth century BC elaborated on the idea. Etymologically, “Philanthropy” means “the love of humanity.” It was coined 2,500 years ago by its use in the myth Prometheus Bound.

George Peabody (1795–1869) is the acknowledged father of modern Philanthropy. A financier based in Baltimore and London, in the 1860s he began to endow libraries and museums in the United States, and also funded housing for poor people in London. His activities became the model for Andrew Carnegie and many others.

But later, Philanthropy became a term used by Fredrick T. Gates and John Rockefeller in the early 1900s as a Nazi damage control public relations strategy. They give to appear magnanimous and hide the fact that they are killers.

--Gregory L. Garrett

Hate Speech

In general terms, hate speech is any speech that conflicts with propaganda and lies being put forth by an ignorant and controlling faction. The term was invented to suppress truth and informed research.

--Gregory L. Garrett

Preface

Being Wise as Serpents in the Shadow of a New World Order Conspiracy

The New World Order used a worldwide Plandemic to unveil itself to the world. And I want to remind you, these conspirators didn't have to reach into every person's life on Earth and snatch our freedoms away, but the reality is, they did exactly that. They closed our businesses, our churches, our schools, and with these masks our very mouths; quarantined the world so everyone on earth could witness this colossal unveiling by the power elite.

You bet, they could have just given everyone common sense hygiene guidelines and been done with it like in times past, and continued to stealthily implement the Beast system behind the scenes, but they instead chose this moment in history to shackle everyone with this "New Normal."

No need to close your eyes to the conspiracy anymore, they obviously want you to see it now.

What Normal?

If you were hoping a return to normal, I promise you there is no plan to lift the ban on "Normal."

For example Dr. Fascist Fauci, in Draconian fashion told the New York Times that if we were to "Open America Again" we would actually be set back on our "quest to return to normal". Fauci told The New York Times on Monday he planned to publicly warn states that prematurely reopening their economies will cause "needless suffering and death."

"The major message that I wish to convey to the Senate HLP committee tomorrow is the danger of trying to open the country prematurely," Fauci wrote in an email to Times health policy reporter Sheryl Gay Stolberg.

"If we skip over the checkpoints in the guidelines to: 'Open America Again,' then we risk the danger of multiple outbreaks throughout the country. This will not only result in needless suffering and death, but would actually set us back on our quest to return to normal..." (New York Times, 5/12/2020)

So, let me get this right, a return to normal could actually set us back from returning to normal? Total double-speak.

Reading between the lines, we can forget about normal, as to our freedoms, it is all fiat technocratic whims from this point on; normal will return when the bankers feel everyone is destitute and completely dependent on their grid of control.

It is safe to say the confusion, lies and chaos is purposefully disorienting, the media and political elite have us spinning in circles like kids on an out of control merry-go-round, ready to vomit. Not everyone is spinning though, I like what Rand Paul said when speaking to Dr. Fauci recently,

Sen. Rand Paul, R-Ky., had sharp words for Dr. Anthony Fauci, the nation's top infectious disease expert, during Tuesday's Senate committee hearing on the CV.

In arguing for reopening the economy and schools, Paul said, "As much as I respect you, Dr. Fauci, I don't think you're the end-all. I don't think you're the one person who gets to make a decision." (NPR, 5/12/2020)

Rand Paul as a truth teller, reminds us why there is war on conspiracy theorists raging right now, they hate our ability to elucidate, articulate, and eviscerate their devices of control through the exposure of Truth. Control freaks don't like being told no and that their prognosticating C 19ID models are wrong as a recent expert pointed out.

They create illusions to modify and engineer behavior, their illusions must be maintained to continue the planned outcome of global slavery.

Conspirators vs. the Conspiracy Theorists

Liberals and fearful statists can delude themselves into thinking our institutions of science rely on peer review journals, and double-blind studies to gage their thinking and response, but the truth is, they instead used speculative C 19ID death models as a means to persuade governments worldwide to shut their respective nations down. No math, no reason, no solid data, just pretty color coordinated charts with curves. A full out propaganda campaign, complete with catch phrases like "flatten the curve", "social distancing requirements" and "self-quarantine."

This isn't science, this is illusion, theater and a power grab by a scientific dictatorship that is frighteningly interested in our blood, DNA, antibody count, vaccine submission, contact tracking and certification.

Whether you like it or not the "conspiracy theorists" connecting the dots and warning of this very thing were and are still completely right. Yet these pioneers of Truth and defiance that have been raising the alarm for years now have targets on their backs. Major platforms are banning truth tellers left and right. Censorship is official policy now, just ask YouTube CEO Susan Wojcicki simply saying they ban anything that goes against WHO guidelines,

"Wojcicki…Anything that goes against WHO recommendations would be a violation of our policy and so remove is another really important part of our policy." (Reuters, 4/23/2020)

So, when it comes to creating guidelines on free speech, people like Susan Wojcicki will default to the W.H.O's recommendation, a globalist organization instead of our Founding Fathers and the Constitution of the United States. She forgets it was the public commons and free exercise of speech that built the You Tube platform into what it is today. They are traitors to their own user base as well as the Constitution, they are one of the conspirators acting in lockstep.

There is a massive attack on free speech; anyone speaking out against this fake Plandemic is being hard labeled as conspiracy and fake news. If you do a Google search on "C 19 Conspiracy Theories" you will see 100's of pages worth of mainstream articles trying to offer explanations on why people

gravitate to conspiracies. One such article attempting to explain this trend is from DisC 19ery Magazine who felt the need to virtue-signal saying they removed their paywall to allow free access to this "important" C 19ID content, saying,

"Editor's Note: We've removed our paywall from this article so you can access vital CV content. Find all our C 19erage here. To support our science journalism, become a subscriber.

Since C 19 lock downs descended, people's longings for haircuts, childcare and adult interaction have steadily grown. But there's one thing for which our appetite seems even more insatiable: conspiracy theories.

The latest example making the rounds is the already-debunked Plandemic video, which argues that shadowy forces manipulated the virus to control people. Despite its out-there premise, the video has had serious uptake: It racked up more than a million views before YouTube removed it. Other discredited C 19ID theories have amassed their own cult followings.

It can feel baffling to watch friends and family passing on such theories like gospel. But to behavioral scientists, it isn't really all that surprising — especially in the midst of a pandemic.

People seek out alternate takes on reality when they're inclined to mistrust official ones for various reasons. Groups most prone to conspiracy theorizing include people with lower socioeconomic status, those who have been excluded or ostracized and those who feel life is out of control. All of these groups' numbers have swelled since the start of the pandemic. "Where people are feeling powerless, anxious and threatened," says North Umbria University social psychologist Daniel Jolley, "conspiracy theories can offer some relief."

When you've been relegated to an out-group, it's easy to see conspiracy theories as the perfect antidote to exclusion. The theories give believers the heady sense that they're special or set apart: Unlike all the other misguided "sheeple," they reason, they now understand what's really happening. Research

confirms that people adopt conspiracy beliefs as a way to feel unique." (DisC 19er Magazine, 5/11/2020)

So, according to this "prestigious" journal, C 19 conspiracies have been debunked, and only impoverished loners believe them, because the desire to feel unique supersedes the desire for establishment data.

Not one instance of proof refuting the claims made in the banned Plandemic documentary that went viral, just hyperbole and talking down to people who think this stinks to high heaven.

By this standard Dr. Ben Carson who is the current Secretary of Housing and Urban Development is a conspiracy theorist as well when he went on Fox News and said, "This economic crisis we are experiencing right now was intentional."

The reality is the only people who are not questioning the narrative are organizations that are so desperate for federal bailout money, they will forever tow the establishment line as a qualification of that money to stay alive. Really is brilliant. That is why companies are perpetuating the distancing guideline protocols long past the actual government directed shutdown orders, they need that money. So, the animosity towards government is being deflected now onto the private sector and businesses like COSTCO who have their hands out. The money from government is proving to be far more substantial than the money of their customer base, and until that changes these Draconian limits on our lives and freedom will be indefinite. Simply put, unless people boycott these stores to the degree the government money is no longer sufficient, they will never change their policies.

If you are going to navigate this upcoming season of change, we need to be bold and working together, because you can see how the forces of darkness are working together to rid us of our freedom as I write this.

Conclusion

With this in mind, it seems fitting to recall the words of Jesus and remember his advice as we navigate this wicked world, boldly proclaiming His truth.

Behold, I send you forth as sheep in the midst of wolves: be ye therefore wise as serpents, and harmless as doves. - Matthew 10:16

He is saying in the modern vernacular, I send you, gentle Christian into a world that is ravenously evil, be so wise and knowledgeable of this evil that you can discern the devils conspiracy going way back to the serpent of Eden itself. The conspiracy to rid the world of nationhood and humans of divine value goes back a long way.

Jesus said, I want you to know your enemy so well, that you can see his plan in everything; you can even predict the movements of the enemy before he even makes them. This is the level of knowledge the Bible would have you aware of the larger satanic conspiracy. Don't give into the persecution and down-talking of those around you that can't see this for what it is, speak all the more loudly. Dig into every aspect of the conspiracy, nothing should be off limits. Jesus Himself is instructing us to know so much about our enemy and Satan's sick tactics that we can then know how to act and work to stay ahead of his devices.

My first advice is get out of the cities; these cities are pinch points of compliance. That should be your first take-away when deciding to do something right away with this new awareness. First thing is first get your families to a safe location, that is priority number one. Then work on the basic needs of self-sufficiency.

A positive to all of this is right now the system is at its weakest because of how they have tipped their hand and revealed themselves by harming everyone at fundamental level surrounding basic needs and freedoms. But they will only get stronger from here as compliance to the "New Normal" solidifies into the new status quo of encroachment. We can't let that happen, protest, resistance and the free exercise of our rights have become an essential element

of stopping this demonic assault. Being wise as a snake would indicate that now is the time to strike and resist.

Jason Charles on 5/13/2020, Globalism/N.W.O-https://wakethechurch.org/articles/being-wise-as-serpents-in-the-shadow-of-a-new-world-order-conspiracy



The Weapon

We’ve got nothing to fear — but fear itself?
Not pain or failure, not fatal tragedy?
Not the faulty units in this mad machinery?
Not the broken contacts in emotional chemistry?

With an iron fist in a velvet glove
We are sheltered under the gun
In the glory game on the power train
Thy kingdom’s will be done

And the things that we fear
Are a weapon to be held against us…

He’s not afraid of your judgement
He knows of horrors worse than your Hell
He’s a little bit afraid of dying —
But he’s a lot more afraid of your lying

And the things that he fears
Are a weapon to be held against him…

Can any part of life — be larger than life?
Even love must be limited by time
And those who push us down that they might climb —
Is any killer worth more than his crime?

Like a steely blade in a silken sheath
We don't see what they're made of
They shout about love, but when push comes to shove
They live for the things they're afraid of

And the knowledge that they fear
Is a weapon to be used against them…

--RUSH

All we need is the right major crisis and the nations will accept the New World Order.

--David Rockefeller

It is cowering in place, not sheltering in place.

--Gregory L. Garrett

When Bill Gates said, recently, in an interview with Stephen Colbert, that Phase II of the Pandemic was next, what did he mean? And then he went on to mention the idea of a Bioweapon, in the next breath. Ok, hiding in plain sight again, Bill? His Vaccine IS the Bioweapon. Buckle up, everyone. You ain't seen nothing yet!

--Gregory L. Garrett

It used to be that you could be arrested for wearing a mask in a bank. Now, you can be arrested for NOT wearing a mask in a bank.

--Gregory L. Garrett

Walking into a grocery store without a mask is an act of terrorism, punishable by jail time.

--Gregory L. Garrett

Deaths by other causes labeled as CV death: Lung cancer, liver failure, pneumonia, etc. Any patient with any sort of breathing issue is labeled as a CV patient. Italy just introduced a new multi-strain flu vaccine. China just mandated vaccines. Vaccines are the delivery system for these man-made viruses that are all patented. Not to mention that 5G exposure can cause the same symptoms as CV. It interferes with oxygen and is derived from military technology used for crowd control.

-- Dan Corrigan

Hospitals under the control of the cabal willing to perpetuate the lie… did you also know that patients were isolated, and nurses were not allowed to even examine patients? They were left to die on ventilators. A nurse said it was straight up murder. The people didn't have difficulty breathing, which is what a ventilator is for. But then, on the ventilators, they couldn't get enough oxygen. Once they started giving patients oxygen they started getting better. This was not allowed though because it was believed that oxygen would cause the virus to aerosolize. (Complete bullshit)

-- Dan Corrigan

David H. Freedman has a profile in The Atlantic's November issue on meta-researcher John Ioannidis. A career critic of medical science, Ioannidis is, among other things, author of "Why most published research findings are false," reportedly the most-downloaded article on the PLOS Medicine website. The threat to the objectivity of medical research comes not just from the financial interests of drug companies, but from the "intellectual conflict of interest" that pressures researchers to seek out and publish noteworthy, fundable results. "Even when the evidence shows that a particular research idea is wrong, if you have thousands of scientists who have invested their careers in it, they'll continue to publish papers on it," Ioannidis says in the article. "It's like an epidemic, in the sense that they're infected with these wrong ideas, and they're spreading it to other researchers through journals." While error is a normal part of empirical science, the problem, he explains, is that new results are too easily believed and then are hard to part with.

-- https://medicalevidence.wordpress.com/2010/10/26/the-atlantic-lies-damned-lies-and-medical-science/

The C 19 tests will have CV in them. If you take the test, kiss your ass goodbye.

--Gregory L. Garrett

What we are experiencing is an overabundance of misinformation about how viruses actually function and what they are.

The real Pandemic is a MisInfodemic.

--Gregory L. Garrett

Louis Pasteur faked his science to promote his viral theory of disease.

--Gregory L. Garrett

There are the sleepers and the awakened. The lines have been drawn, and it's never been clearer who is who. All we need to do is see who has a 3 x 5 piece of worthless paper on their face.

-- Bill Van Horn

The Technocratic Elite love to act like they care about you by using phony philanthropic fronts, like the lethal Bill and Melinda Gates Foundation, to push their depopulation agendas.

--Gregory L. Garrett

The primary modus operandi of the Technocratic New World Order is to communicate to you that you are "NON-ESSENTIAL". That is what the masks and all the social distancing is about…to make you think you are an undesirable, diseased, animal, ready for culling.

They want 90% of the world to die, so they can install their Artificially Intelligent, Transhumanistic New World Order.

--Gregory L. Garrett

By manipulating the public perception of a virus that does not actually exist, the Technocratic Elite have been able to convince the word that there is an Invisible Enemy that they cannot see. Then, test kits are administered, which merely test for basic genetic material that every human has in their body from birth, to assert anything they want, like spinning a wheel of fortune:

1) You have the virus.
2) You don't have the virus.
3) You have built up immunity.
4) You have not built up immunity.
5) You are asymptomatic.
6) You are pre-symptomatic.
7) You may be have tested false positive.
8) Just whatever they want to say based upon a bogus test…

--Gregory L. Garrett

Prudence, indeed, will dictate that Governments long established should not be changed for light and transient causes; and accordingly all experience hath shewn, that mankind are more disposed to suffer, while evils are sufferable, than to right themselves by abolishing the forms to which they are accustomed. But when a long train of abuses and usurpations, pursuing invariably the same Object evinces a design to reduce them under absolute

Despotism, it is their right, it is their duty, to throw off such Government, and to provide new Guards for their future security.

--The Declaration of Independence

Welcome to 1984's Ministry of Truth, where only selected facts are allowed to exist while other facts that don't fit Washington's neoliberal narrative will be labelled "fake news" and suppressed.

--Online

Why is Bill Gates so desperate to get everyone Vaccinated when it is a widely recognized fact that 95% to 99% of all those who contract this mythical C 19 strain of CV fully reC 19er solely from the strength of their own natural immune system?

--Gregory L. Garrett

Measles is NOT a disease, but a developmental process of childhood. Blocking that process with a vaccine stunts the child's physical and emotional development.

--Gregory L. Garrett

Somatoscopy is the description of morphological physical characteristics of humankind based on visual observation of morphological traits. Therefore observation of physical characteristics is the basic method of Somatoscopy.

No Somatoscopic observation has ever identified any external entity known as a virus, external to the natural DNA make up of a human body.

--Gregory L. Garrett

Proteins detected by the C 19 test are from the tested person's own cells, and not from any external virus assault.

--Gregory L. Garrett

The primary function of vaccinations is to spread diseases…what more can be said?

--Gregory L. Garrett

"Once the herd accepts mandatory forcible vaccination, it's game over! They will accept anything – forcible blood or organ donation – for the "greater good." We can genetically modify children and sterilize them – for the "greater good." Control sheep minds and you control the herd. Vaccine makers stand to make billions, and many of you in this room today are investors. It's a big win-win! We thin out the herd and the herd pays us for providing extermination services. Now, what's for lunch, huh?"

--Attributed to Henry Kissinger (But it does not matter who actually said it. It stands alone as a Technocratic Elite philosophy.)

No mask. No test. No vaccine. Lock and Load.

--Anon

The Final Solution in Germany was the extermination of The Jews. And, Bill Gates is on record declaring that his Vaccines are "The Final Solution ". Any more questions?

--Gregory L. Garrett

Facebook took down a quote that pertained to the way the government is slowly stripping away our clvi liberties. However, it was taken down because they said it was attributed to Adolph Hitler, erroneously. They did not even address the CONTENT of the quote...just that it was attributed to the wrong person.

They said:

"The post has been shared over 2,600 times since March 21 and was flagged as part of Facebook's efforts to combat false news and misinformation on its News Feed."

Here is the quote:

"The best way to take control over a people and control them utterly is to take a little of their freedom at a time, to erode rights by a thousand tiny and almost imperceptible reductions. In this way, the people will not see those rights and freedoms being removed until past the point at which these changes cannot be reversed."— Attributed to Pat Miller, Willfully Ignorant

It is irrelevant who said it!!!!!!!!!!!!!!!!!

The CONTENT of the quote is the salient factor of it.

Nevertheless, judging from the Swastika on Pat Miller's book C 19er, it was most likely ABOUT Hitler, so it is a moot point, anyway.

--Gregory L. Garrett

Grounds for the International Arrest Warrant for the Bill and Melinda gates Foundation

The grounds for this international arrest warrant include but are not limited to acts of international terrorism through inciting fear into the general public with falsified international medical records, a hoax pandemic, gaslighting the general public, causing mass hysteria, manipulation of the general public through television airways using Communist propaganda, thereby violating Natural Law by subjecting all the people in the world to forced medical experimentation, which violates intangible rights to the people's tangible bodies, waging biological warfare, also to include violating the Law of Armed Conflict by inciting International Martial Law, regulating civilians by placing the military above all civilian powers, all of which amounts to international war crimes perpetuated by Bill Gates, Melinda Gates, and The Bill & Melinda Gates Foundation, and all associates, known and unknown, as well as violations of numerous Articles within the Universal Declaration of Human Rights (UDHR) and the Law of Nations, to wit.

https://www.google.com/search?q=Intermational%20arrest%20warrant%20for%20Bill%20gates

Nazi soldiers and guards said they were only doing their jobs at concentration camps. The police state will offer the desperate unemployed Gestapo type police jobs. They'll take the jobs and tow the party line and then say. "I'm only doing my job.", as they brutalize us and arrest us for not allowing them to take us to a hospital or detention quarantine center, against our will.

The police officers only justifications will be, “I’m paid to do this, sir." And, “A judge signed this, so I am authorized to do whatever it takes to apprehend you. It’s for your safety, sir." They’ll give violent ultimatums and threats as a coercion tactic until you submit to incarceration, or they will use force to remove you from your home.

--Gregory L. Garrett

If you want to catch an animal, you cast a net. If you want to catch a human being, you cast an Internet.

--Gregory L. Garrett

In 2008, a group of villagers believed to have spent 11,000 years in isolation, were spotted in a remote part of the Amazon rainforest. In 2015, scientists disC 19ered that thousands of years of seclusion had left them with the most diverse microbiomes they had ever seen. Scientists concluded their microbial diversity was further proof that the battles waged against germs in the industrialized world had worked a little too well. Those of us living in modern cities, towns and villages had destroyed so much of the healthy microscopic life that belonged in our bodies, it had rendered our own microbiomes comparatively deficient.

--Anon

The lockdown is the killer, not the imaginary virus.

--Gregory L. Garrett

The main message of the lockdown/unemployment is that you are non-essential You and your job does not matter, unless you are a politician or whomever politicians deem essential…like liquor stores and 7-Elevens, but not gyms or churches.

--Gregory L. Garrett

The loosening of lock down is merely "PHASE 2" (Gates' own words) of Bill Gates' plan to create the illusion of C 19 resurgence being linked to free social movement.

--Gregory L. Garrett

Big Pharma and Modern Vaccines came out of The Eugenicist's Movement decades ago.

--Gregory L. Garrett

It is the fully sane person that feels utterly alone in an insane world.

--Gregory L. Garrett

Yes sir, in my country of Botswana of 2.4 million people, and over a 600,000 sq. km, the recorded number of C 19 cases was 23, 14 reC 19ered, and 1 death. That's 1 death in four months with 2.4 million people. And yet, thousands have died from the common flu and heart disease in old age, here.

And, we had not sheltered in place in my country. The 1 alleged C 19 victim was a 69-year-old woman with a bad heart, as was determined by postmortem.

But we still have words, “crisis” and “Pandemic” in our mouths.

-- Boikhutso Gaobewe, Botswana

There are two test: One for antibodies, and one for C 19, and both are on record with the CDC as ineffective. Let that sink in.

--Gregory L. Garrett

It might seem innocuous to arbitrarily follow a new regulation or guideline that seems illogical. Maybe you’ll feel stupid for not just knowing why everybody else seems to think it makes sense. Maybe you’ll feel afraid to be the odd man out who’s not going with the flow. This is how conformity works. And before you know it, nobody is asking questions- and everybody has surrendered their will and succumbed to the hive mind. I’m all for rules and guidelines THAT MAKE SENSE. To hell with anybody who chastises you for asserting your right to demand an explanation for why conditions are changing, or your rights are being infringed upon. As an American, you have a DUTY and an OBLIGATION NOT to simply conform. You have a responsibility to the preservation of freedom to stand up and ask, “WHY?”!!!

--Anon

Anthony Fauci deserves the award for Doctor of The Year as much as Jack Nicholson deserves the award for Father of the Year in his role as Jack Torrance in The Shining.

--Gregory L. Garrett

A registered nurse was asked to leave NYC hospital for exposing that C 19 patients were dying from the very treatment being used and not from the alleged virus. What she witnessed at the NYC hospital was murder. Basically, if a patient with Medicare or Medicaid goes to the hospital with flu symptoms, they get put on the ventilator and left to die. For every patient that gets put on the ventilator, the hospital receives $39k from the government. But if a private insurance patient comes into the hospital with flu symptoms, they are sent home to rest and their life is spared.

-- Veronica Ivonne

I don't know about you, but this sounds like eugenics to me.

According to the top Epidemiologists in the world, the only way to stay healthy during this Pandemic is to NOT shelter in place and NOT wear a mask, ever.

--Bill Gates

Medicare and certain private health insurance companies pay for hospitalizations of their beneficiaries using a diagnosis-related group (DRG) payment system. When you've been admitted as an inpatient to a hospital, that hospital assigns a DRG when you're discharged, basing it on the care you needed during your hospital stay. The hospital gets paid a fixed amount for that DRG, regardless of how much money it actually spends treating you. If a

hospital can effectively treat you for less money than Medicare pays it for your DRG, then the hospital makes money on that hospitalization. If the hospital spends more money caring for you than Medicare gives it for your DRG, then the hospital loses money on that hospitalization.

A flu cause of death diagnosis can reap up to $3000 for a hospital. However, hospitals get over $39,000 for C 19 victims. They also get from 1,000,000 to 10,000,000,000 for special C 19 treatment improvements centers. This is why all the hospitals in America shut down to all patients except C 19 patients. There are few people as corrupt as the nurses and doctors who are profiting from this.

--Gregory L. Garrett

We have finally arrived. The silent war where each person stares out to each other person through a mask of quiet desperation. The rest are driven to distraction by their vices and infantile fears.

--Gregory L. Garrett

Grey Matter

They say you're stupid

That you're too young to vote

They say you'll swallow anything

That they shove down your throat

They say you can't think
That you haven't got a brain
That you're just there to listen
That you're just being trained

There's something inside your head
There's something inside your head
There's something inside your head
There's something inside your head

They say you lost the ability to even think
That your tiny little brain
Slipped down the kitchen sink
They say that you'll buy anything
That they turn your way
That you'll listen to everything
That they decide to play

Grey matter grey matter ooh . . .
Grey matter grey matter ooh . . .
Grey matter grey matter ooh . . .
Grey matter grey matter ooh . . .

I think you like it--like it
To be told what to do--isn't that true
I think you're better--better--better off
Stone cold dead--without your head

They say you're stupid
That you're too young to vote
They say you'll swallow anything
That they shove down your throat

If they say lie down, you'll do it
If they say--buy it now--you'll do it
If they say--turn around--you'll do it
If they say--hit the ground--you'll do it
If they say--bite the big weenie--you'll do it
If they say--wasn't that good--you'll do it
If they say--bend over baby--you'll do it
If they say--take it and like it--you'll do it

There's something inside your head
There's something inside your head
There's something inside your head
There's something inside your head

--By Oingo Boingo

In a nutshell, Vaccines increase immune deficiency, which in turn, lays people open to more disease, and eventual death. Vaccines are a Eugenics weapons for depopulation.

--Gregory L. Garrett

Half Truth make good Full Lies.

--Gregory L. Garrett

Statement:

OK, is it time to push back now? Legally, you will be removed from your home under Number of the Beast bill H.R. 6666. This is exactly how the Nazi Gestapo rounded up the Jews in Germany for execution. Will you just submit as they take you away for suspicion of C 19ID? This is a real bill. I'm not making anything up. Bill H.R. 6666.

Reply:

Do these idiots not realize that there are a lot of us who are related to the people the Nazi Party mistreated in this manner during WWII?....all of us 50..60..70 year olds are the offspring .....and you think we would sit still for this

Second Time... SERIOUSLY???? It certainly won't end well for anyone trying this tactic again......and you can take that to the Bank.

--Gregory L. Garrett and Bert Broere

During flu seasons, most hospitals are running up to 110%, with nurses having to work 16-hour shifts. But, with the C 19 Fakedemic, hospitals are running from 16% to closing completely from lack of patients, doctors and nurses are being furloughed and told not to show up to work for lack of patients, zero C 19 patients are diagnosed at all in many hospitals, the ICUs are empty, and the ventilators are not being used at all. So where is the Pandemic?

--Gregory L. Garrett

For those of you still in a love affair with your own fear. This is for you.

Thanks for contributing to the end of humanity. Because, I am not afraid to say it. All those who are cowering in fear of the imaginary virus, wearing masks while driving and alone outside, are responsible for the rest of us dying by the hands of this Technocratic Cabal.

I blame you.

If it wasn't for your fear and imbecilic ignorance about this Fakedemic, we might still have a chance of surviving. Our numbers would be sufficient to put down this Technocratic Elite Cabal.

I know you think you are being sensitive and noble by submitting to the Technocratic propaganda machine about a Pandemic, but in actuality, you are a cowardly idiot, and we are all going to pay the price for your stupidity.

Oh, I know, you just couldn't figure it out, right? Thousands of blogs, reports, scientific papers, videos, doctors, nurses, posts, etc... have been exposing and educating you about this fake Pandemic, but you are too stupid to get it, aren't you, right?

Wrong.

You are too spineless.

--Gregory L. Garrett

That was when they suspended the Constitution. They said it would be temporary. There wasn't even any rioting in the streets. People stayed home at night, watching television, looking for some direction. There wasn't even an enemy you could put your finger on.

— Margaret Atwood, The Handmaid's Ta

Quotes from The Club of Rome

"***The common enemy of humanity is man.***
In searching for a new enemy to unite us, ***we came up***
with the idea that pollution, the threat of global warming*,*
water shortages, famine and the like would fit the bill. All these
dangers are caused by human intervention, and it is only through
changed attitudes and behavior that they can be overcome.
The real enemy then, is humanity itself."

– Club Of Rome, Consultants To The United Nations

"*The Earth has cancer and the cancer is Man.*"

– Club of Rome, Mankind at the Turning Point

"The greatest hope for the Earth lies in ***religionists and scientists uniting to awaken the world*** *to its near fatal predicament and then leading mankind out of the bewildering maze of international crises into the future Utopia of humanist hope."*

– Club of Rome, Goals for Mankind

"In Nature organic growth proceeds according to a Master Plan, a Blueprint. Such a 'master plan' is missing from the process of growth and development of the world system. Now is the time to draw up a master plan for ***sustainable growth*** *and world development based on global allocation of all resources and a* ***new global economic system****. Ten or twenty years form today it will probably be too late."*

– Club of Rome, Mankind at the Turning Point

*"****Democracy is not a panacea****. It cannot organize everything and it is unaware of its own limits. These facts must be faced squarely. Sacrilegious though this may sound,* ***democracy is no longer well suited for the tasks ahead****. The complexity and the technical nature of many of today's problems do not always allow elected representatives to make competent decisions at the right time."*

– Club of Rome, The First Global Revolution

"A keen and anxious awareness is evolving to suggest that fundamental changes will have to take place in the world order and its power structures, in the ***distribution of wealth and income.*** *Perhaps only a new and enlightened humanism can permit mankind to negotiate this transition."*

– Club of Rome, Mankind at the Turning Point

"… *the resultant ideal* **sustainable** *population is hence more than 500 million but less than one billion."*

– Club of Rome, Goals for Mankind

Religious Quotes

"History fails to record a single precedent in which nations subject to moral decay have not passed into political and economic decline. There has been either a spiritual awakening to overcome the moral lapse, or a progressive deterioration leading to ultimate national disaster."

— Douglas MacArthur (1880-1964) Army General, involved in war in the Philippines, World War I, II & Korean War

"But the truth is that it is only by believing in God that we can ever criticize the government. Once abolish the God, and the government becomes the God. That fact is written all across human history; but it is written most plainly across the recent history of Russia; which was created by Lenin. There the government is the God, and all the more the God, because it proclaims aloud in accents of thunder ... one essential commandment, "Thou shalt have no other gods but Me.""

— G.K. Chesterton (1874-1936) British Journalist, Poet, Author and Playwright

"There is a battle in our society, a battle in the western world; it's been lost in the rest of the Western world, at least in Western Europe. The battle ground for this is the United States of America. Will we be governed by, in our own lives, Judaeo Christian values or secular values."

— Dennis Prager (1948-) Author, columnist & host of a nationally syndicated radio show

"Socialism is where decent, but ignorant people evolve to automatically. Is the default position. In other words, people left to themselves, without input of wisdom, end up arriving at the conclusion that socialism makes a lot of sense. … Socialism is only defeated by a constant injection of religio moral energy. Only the Judeo–Christian tradition combats socialism. If you block yourself off from any kind of authentic input of wisdom, little by little socialism begins to make more and more sense."

— Rabbi Daniel Lapin (1950-) Orthodox Rabbi, talk show host and author

"In Hebrew and in the Bible right and left are not directional, they are moral. … In chapter 13 of Genesis when Lot and Abraham separate and Abraham caries the moral structure of civilization, Abraham is the soul of monotheism. ... Lot separates from Abraham and chooses to go and live in the city of Sodom. … Abraham says I'll go right; you are going to go left. In the Hebrew text, going left means departing from the moral foundations of civilization. Now you will understand ancient Jewish wisdom on the closing verse of the book of Jonah. Jonah was all upset that God did not destroy the city of Nineveh. God said how I can destroy them; they are people who don't know their right from their left. … Right and left always means good and evil, right and wrong, light and darkness, the moral structure of civilization vs. the structure barbarism and emptiness. So God says how can I destroy the city of

Nineveh when they don't know right from left or in other words, right from wrong."

— Rabbi Daniel Lapin (1950-) Orthodox Rabbi, talk show host and author

"A wise man's heart inclines him toward the right, but a fool's heart toward the left. Even when the fool walks on the road, he lacks sense, and he says to everyone that he is a fool."

— Ecclesiastes 10:2-3 RSV

"A fool takes no pleasure in understanding, but only in expressing his opinion."

— Proverbs 18:2 RSV

"The Founding Fathers established a system which meant a radical break from that which preceded it. A written constitution would provide a permanent form of government, limited in scope, but effective in providing both liberty and order. Government was not to be a matter of self-appointed rulers, governing by whim or harsh ideology. It was not to be government by the strongest or for the few. Our principles were (counter)revolutionary. We began as a small, weak republic. But we survived. Our example inspired others, imperfectly at times, but it inspired them, nevertheless. This Constitutional Republic, conceived in liberty and dedicated to the proposition that all men are created equal, prospered, and grew strong. To this day, America is still the abiding alternative to tyranny. That is our purpose in the world -- nothing more and nothing less."

— Ronald Reagan (1911-2004) 40th President of the United States

"One of the major differences between the right and the left concerns the question of authority: To whom do we owe obedience and who is the ultimate moral authority? For the right, the primary moral authority is God (or, for secular conservatives, Judeo-Christian values), followed by parents. Of course, government must also play a role, but it is ultimately accountable to God and it should do nothing to undermine parental authority. For the left, the state and its government are the supreme authorities, while parental and divine authority are seen as impediments to state authority. ... In a nutshell, the left wants to have ever-expanding authority over people's lives through ever-expanding governmental powers. It does so because it regards itself as more enlightened than others. Others are either enemies (the right) or unenlightened masses. It is elected by demonizing its enemies and doling out money and jobs to the masses."

— Dennis Prager (1948-) Author, columnist & host of a nationally syndicated radio show

"We can trace all our human problems to our view on God."

— Brad Bright – Author and Public Speaker on God and the Bible

"We are players in our present, we are the current builders of our history. God wants to write, through our hearts, through our lives and Fiats, the history of salvation: a story of love, grace, life, communion and holiness."

— Mother Adela Galindo - Founder of Servants of the Pierced Hearts of Jesus and Mary

"… in the terribly dark moments of human history, God makes himself present, God enters into history in so many forms God intervenes in history, raising up men and women that, in the simplicity and generosity of their fiats, become witnesses of hope, lighted candles, rays of light that pierce the darkness

and reveal to humanity that only with God and in God can man live and walk with meaning, and that only in Him can he find his highest destiny. A witness of hope that where evil abounds, good super-abounds that where darkness, error, violence, and the disorientation of the human heart seem to reign, God in his mercy always sends "stars" that illumine the storms of the ocean of history and, with their light, redirect its horizon, its origin, its destiny, its path."

— Mother Adela Galindo - Founder of Servants of the Pierced Hearts of Jesus and Mary

"When once a republic is corrupted, there is no possibility of remedying any of the growing evils, but by removing the corruption and restoring its lost principles; every other correction is either useless or a new evil"

— Barron Charles de Montesquieu (1689-1755) French political thinker & writer on separation of powers of government

"Socialists cry Power to the people and raise the clenched fist as they say it. We all know what they really mean—power over people, power to the State."

– Margaret Thatcher (1925-2013) British Prime Minister

"It may be true that you can't fool all the people all the time, but you can fool enough of them to rule a large country."

— William James Durant (1885–1981) American writer, historian, and philosopher

"Evil itself is not dangerous without the help of those who tolerate."

— Ted Sampley (1946-2009) Served in the Vietnam in Green Berets & POW Activist

“Men will surrender to the spirit of the age. They will say that if they had lived in our day, faith would be simple and easy. But in their day, they will say, things are complex; the Church must be brought up to date and made meaningful to the day's problems. When the Church and the world are one, then those days are at hand.”

— Saint Antony the Abbot (251-356) - Anthony of Egypt

“‘The Decline and Fall of the United States of America’ is going to be a piece of cake for future historians to write.”

— Pat Buchanan (1938) Author, Columnist, Political Commentator, Politian

"Your silence gives consent."

— Plato (427BC-347BC) Classical Greek philosopher, mathematician, and writer

“We cannot forsake commandments without being forsaken - The only way to prosper is to return to the commandments of our creator. Commandments which for the most part have been forsaken Removed by our schools and public buildings and glossed over by the majority of our churches. Just as in the Garden of Eden people are been persuaded that they can do right in their own eyes. They can be as God and decide what is good and what is evil.… Are we in arrogance to believe that we as a nation can continue to forsake the commandments of our creator without the eventuality of being forsaken ourselves. The commandments he wrote in stone pure they stand fast forever. It is in our best interest to keep them.”

— Richard Rives Richard Rives – Biblical Researcher, Theologian, and Author

"And you he made alive, when you were dead through the trespasses and sins in which you once walked, following the course of this world, following the prince of the power of the air, the spirit that is now at work in the sons of disobedience."

— Ephesians 2:1-3 (RSV)

"Woe to those who call evil good and good evil, who put darkness for light and light for darkness, who put bitter for sweet and sweet for bitter! 21 Woe to those who are wise in their own eyes, and shrewd in their own sight! Woe to those who are heroes at drinking wine, and valiant men in mixing strong drink, who acquit the guilty for a bribe, and deprive the innocent of his right!"

— Isaiah 5:20-23 (RSV)

"Finally, be strong in the Lord and in the strength of his might. Put on the whole armor of God, that you may be able to stand against the wiles of the devil. For we are not contending against flesh and blood, but against the principalities, against the powers, against the world rulers of this present darkness, against the spiritual hosts of wickedness in the heavenly places. Therefore take the whole armor of God, that you may be able to withstand in the evil day, and having done all, to stand. Stand therefore, having girded your loins with truth, and having put on the breastplate of righteousness,"

— Ephesians 6:10-14 (RSV)

"There are two world views at odds with each other. One stands for God and the principles of His Word, and the other seeks to destroy them."

— Janet L. Folger - President of Faith2Feeedom and Author

Overture to Ameri-Geddon

Pre-Crime (Pre-C 19) Minority Report

The thing to understand about the lockdown is that you are not under quarantine. A quarantine is for sick people. You are actually under house arrest. If you are under lockdown without being sick, you are under house arrest. Lockdown under the suspicion of getting sick in the FUTURE is nothing but a Minority Report form of jail.

1) **The Future is Assumed**
2) **You Are Identified on Future Suspicion of Infection**
3) **The Guilty are Punished Before the Crime is Committed**
4) **Nevertheless. Less than .003% have ALLEGEDLY Died, Worldwide, from C 19, Which Makes it is Far Less Dangerous Than the Common Flu**

1.) So now the while idea is to test someone to see if they may be infectious, even though the test is 80% false positive, so they are really useless, ultimately. But, if there is any suspicion you may have been infected with C 19, you will be tracked down and forced into quarantine, and ultimately, forced to take the Vaccination. And if the Artificial Intelligence Contagion tracking system determines that you have been in contact or proximity of someone who might have been infected, you are treated as an infected person and handled accordingly.
2.) Does everyone see how our world is turning into the movie, Minority Report on steroids? In Minority Report, they use a system called Pre-Crime to identify POTENTIAL CRIMINALS, in order to apprehend them BEFORE they have committed any crime. They were merely suspected of committing a crime in the future.
3.) This is exactly what we are seeing with this C 19. If you ARE SUSPECTED of being infected and identified by an almost useless 80% false positive test, you are handled accordingly.
4.) We have a new Pre-Crime system and it is called Pre-C 19.

The Men Behind the Fake Pandemic Curtain

In my career as a professional intelligence officer, I had many occasions to access highly classified documents, but during service as a political science officer in the field in Angola, West Africa, I had the opportunity to view a series of top secret classified documents which were unusually explicit. What I saw filled me with anger and resentment and launched me on a course from which I have not deviated, namely, to unC 19er what power it is that controls and manages the British and United States governments.

I was thoroughly familiar with all of the well-known secret societies such as the Royal Institute for International Affairs (RIIA), the Council on Foreign Relations (CFR), the Bilderbergers, Trilaterals, the Zionists, Freemasonry, Bolshevism, Rosicrucianism and all of the spinoffs of these secret societies. As an intelligence officer, and even before that as a young student in the course of my studies at the British Museum in London, I had cut my eye teeth on all of them, plus a good number of others with whom I imagined Americans were familiar. But when I came to the United States in 1969, I found that names like the Order of St. John of Jerusalem, Club of Rome the German Marshall Fund, the Cini Foundation, the Round Table, the Fabianists, the Venetian Black Nobility, the Mont Pelerin Society, Hellfire Clubs, and many others were at best totally unknown here, or else their true functions were at best but poorly understood, if at all.

In 1969-1970 I set about remedying the situation in a series of monographs and cassette tapes. Much to my surprise I soon found plenty of people willing to quote these names as if they had known of them all of their writing careers, but who were not in the least bit knowledgeable about the subjects, yet quite unwilling to state the source of their lately acquired information. I consoled myself with the thought that imitation is the sincerest

form of flattery. I pursued my investigations, pressing on in the face of severe risks, attacks on myself and my wife, financial losses, continual harassment, threats and calumny, all part of a carefully-crafted and orchestrated program to discredit me, run by government agents and informers, embedded in the so-called Christian rightwing, the "Identity Movement" and rightwing "patriotic" groups.

These agents operated, and still operate, under C 19er of strong and fearless outspoken opposition to Judaism their main enemy, they would have us believe. These agent-informers are led and controlled by a group of homosexuals who are well liked and well-respected by political and religious conservatives all across the United States. Their program of calumny lies and hatred, disinformation about my work, even lately attributing it to other writers, continues unabated but it has not had the desired effect. I shall carry on with my task until I have finally ripped off the mask of the entire secret upper-level parallel government that runs Britain and the U.S. This book is a part of that ongoing effort.

--Dr. John Coleman, November 1991

Ode to the Brave

To all you, who in your apathy and silent indifference, bellied over to allow the Technocratic Elite to genocide the rest of us, we shall not forget you. Do not think, in your apathy, you have escaped anything, for ignorance is no longer bliss, but rather, ignorance is suicide for you, and genocide for the rest.

In your attitude of indifference, in your retreat of unconcern, in your choice of unresponsiveness, in your cowering in detachment, in your blatantly wicked dispassion, you slay all Mankind. You lay claims to lethargy, listlessness, and enervate to deprive and destroy any force, strength, or vigor in any who would seek survival in the face of bitter darkness, against principalities of spiritual wickedness, and against rulers pledged to annihilate flesh and bone.

You have pledged with your mouth the credo, "I just don't care". But your selfish words are not impotent and reverberate out to affect and infect us all. Your words carry the blood of the innocent children upon them, those innocent young who DO care, but are too young and defenseless to protect themselves. Your words of selfish apathy not only destroy you, but they also

slay the innocent, who, unlike you, are struggling with every fiber in their being to survive and live. They choose life but will be denied their God given right to life by your failure to care. You are not blameless, and you will not escape Judgment for your indifference, here, or hereafter.

Perhaps, the greatest sin of the apathetic is not that they don't care, but rather, that they don't care that they don't care. Subsequently, indeed it is true, the apathetic, because they are lukewarm and neither hot nor cold, shall be spit out from the mouth of The Lord.

For, what can be said of the apathetic?

- Are they profoundly justified in their caring only for themselves?
- Are they the true Holy Ones for not caring about anything but their own survival?
- Are they The Anointed Ones for their complete lack of love for anyone else, and failure to worship the very Creator which created them?
- Is their self-hatred driven indifference excusable?
- If life is struggle, is the soldier who lays down his weapon to die and allows others to die a hero?
- Are the apathetic excused from defending the life of a child just because they do not FEEL like helping?
- Are the apathetic morally justified in turning away from the community that gave them their ability to live, the community that they had freely accepted electricity, food, shelter, water, services, etc... from?
- Are they excused from any demonstration of gratitude to any other person and God just because they are having a rough time?
- Who isn't having a rough time?

How is it that the apathetic are so secretly proud of their uncaring?

How is that the apathetic are so justified in themselves as to shun The Will of God, and even to the extent of not even caring to seek it?

How is that the apathetic find so much comfort in ignoring the dying child right beside them in submission and deference for licking their own wounds?

Meanwhile, the bombs drop all around, killing every last person who fought for even the soul of the apathetic. What is to be the Judgment of such a one who is mired in self-pity, egoism, and indifference for all others but himself? Do the apathetic think they will not be Judged by The Lord on their deathbeds, as we all are, purely because they ignore any responsibility for their Sin, and their debt to God in these last days, their final moments?

The wrath and passion of the caring is upon the Technocratic Elite as well as the apathetic. We who refuse to be enslaved will not stop at the bringing down of tyrants. We cannot. For what is more tyrannical than the individual apathy that led to this dark place?

Like a mountain river run wild, the wrath of the caring will flow over the jagged rocks of tyrants, and the apathetic alike, bringing down strongholds of indifference and edifices of self-righteous cowardliness. In these End of Days, the indignant torrents of the Godly shall lay waste to even the apathetic, leaving nothing but a pathway to Redemption in its wake.

For we wrestle not against flesh and blood, but against principalities, against powers, against the rulers of the darkness of this world, against spiritual wickedness in high places. -- Ephesians 6:12 King James Version

I Refuse

1) I refuse to participate in "quarantine life" until there's an unsafe, untested vaccine released in eighteen months.
2) I refuse to receive a toxic, life threatening vaccine to make others feel safer. I also will not set myself on fire just to keep you warm. If you're convinced the vaccine is safe and effective, you can get it yourself.
3) I refuse to get a vaccine to protect you. If the vaccine is so effective, then why do I need to get one, too, to protect you? Your logic is asinine.
4) I refuse to descend into poverty for you.
5) I refuse to walk on eggshells to protect your fear of sickness.

6) I refuse to coddle you in your sick and twisted rationalization for allowing economic collapse which is resulting in 230 million people to die this year of starvation, as a direct result of the lockdown and unemployment, just to save a few thousand flu victim, when 670,000 die of the flu every year, anyway.
7) I refuse to be treated like a I have Leprosy every time I say hello or goodbye by shaking hands. Your fear of contagion is infantile and based upon pseudo-science. Just fuck off.
8) I refuse to cooperate or be complicit in the economic collapse of the world by sheltering in place and sucking off the government like a Communist idiot.
9) I refuse abstain from human contact to bolster up your little paranoid Hypochondriacal nightmare.
10) I refuse to do your work for you because you are staying in bed all day every day waiting for the next flu symptom to strike you.
11) I refuse to embrace and accept fear and policies devoid of scientifically accurate data which destroy America and ruin everyone's life.
12) I refuse to be silent in the face of tyranny and not educate others about the fallacious nature if this PLANdemic hoax just to be politically correct and fit in with frightened sheep.
13) I refuse to allow the government to make decisions about my health. It is my life. If I want to take health risks, it is my decision alone. There is no law against over drinking which kills millions every year. There is no law that says you cannot drive, and millions die every year from car accidents. Life is full of risks, so what? But now, you cannot go run on the beach or in a public park or your will be cited or possibly arrested.
14) I refuse to cower in fear to your plea that I do not care about your health because I won't wear a mask when I am 5 feet from you. Wearing a mask all the time is extremely bad for MY health. You do not seem to care about that, do you? You only care about YOUR health, so again, fuck off.

We have a constitutional right to take risks. Life is full of bacteria, mold, fungi, protozoa, chemicals, toxins, etc… In the presence of such threats, your

immune system learns to stay strong. In the absence of any external threats, your immune system gets weaker and weaker until just about anything can make you sick.

The data was inaccurate at best and purposely overblown to justify government overreach at worst.

Stop allowing the government to destroy:

- The Food Supply
- Small Businesses
- Medical Autonomy
- Access to Healthcare
- Religious Gatherings
- Privacy Rights
- Fellowship

If you want to stay home, stay home.

If you want to wear a mask, wear a mask.

If you want to avoid large crowds, avoid large crowds.

But, don’t expect me to follow you when the "new normal" is filled with starvation, depression, suicide, imprisonment, governmental spying, and pure DESPERATION.

The virus is going to look preferable to the world you helped facilitate.

For This

A propaganda story came out of China about a flu.

That is all that happened.

For this:

1) We've locked down much of the world.
2) We've stolen our children's childhoods.
3) We've destroyed the future for humanity.
4) We've taken away people's livelihoods.
5) We've decimated small businesses, mom and pop shops, and family owned businesses that have been around for years...gone.
6) We've relegated millions of hard-working people to the trash heap as "non-essential" workers.
7) We've released hardened criminals from prison while imprisoning joggers and mothers who take their kids to the park to play.
8) We've destroyed our health by wearing a muzzle all day to inhibit the intake of fresh oxygen.
9) We've closed all gyms and health and vitamin stores but kept liquor stores open.
10) We've seen a massive spike in domestic abuse, depression, drug and alcohol abuse, rape, suicide, child molestation, and death as a direct result of the stay at home, shelter in place, and quarantine "orders."
11) We've placed our future and all our trust in a few criminals in the White house and the television instead of in our own reasoning faculties and knowledge.
12) We have given up our civil liberties and our Constitutional rights, without a fight, just because we were told to.
13) We have allowed, yes, we have allowed, our government to suspend The Constitution.

14) We've allowed people to become ill, not receive needed medical services, and even die because hospitals will not take any patients that are not C 19 victims.
15) We've allowed our loved ones to die alone and scared, unassisted by family and friends because of the shelter in place.
16) We've foregone proper burial services with friends and family.
17) We've avoided human touch.
18) We've assured that our children live in a Communist penitentiary of constant surveillance, digital control, monitoring, and fear.
19) We've handed over all the freedoms that our ancestors won with their very blood.
20) We've placed The Scarlet Letter on everyone's forehead.
21) We've ratted out our neighbors.
22) We've lived in fear.

For this, we should be ashamed and stop it immediately.

--Gregory L. Garrett and Jill Kapper

Cease and Desist Letter

What Can You Do? Draft a Letter to ACLU, U.S. Attorney for Your District, Congressman/Woman/Senator/Attorney General with the following:

Dear ______________________ (President, US Attorney, Governor, Public Health Officer, Mayor, etc)

Your declaration of a State of Emergency for the C 19 diagnosis criteria for a series of pneumonia and influenza related symptoms and the allegations of the existence of a "novel CV" is based on assumptions that are false.

According to the International Committee on Taxonomy of Viruses' (ICTV) Coronaviridae Study Group (CSG) publication on March 2, 2020, the preliminary data suggesting that there was sufficient variation to determine this as a novel virus vs. a

mutation of known CVes was not based on established scientific principles but was responsive to the World Health Organization's prior unfounded declaration of novelty of both the virus and a new disease.

There could be no independent verification of the epidemiologic models predicting dire infection and mortality rates as the underlying models and data were not published, and when sought, were reportedly corrupted so as to make their examination impossible.

In violation of State law, no medical or scientific evidence was provided to establish causal links between the SARS C 19-2 and the symptoms of C 19 relying instead on foreign government hearsay and conjecture.

Since 2003, the U.S. Department of Health and Human Services and their subordinate organizations – the National Institute of Allergy and Infectious Diseases (NIAID) and the Centers for Disease Control and Prevention (CDC) – maintained a patent preventing any independent organization from testing for the presence of CV transmissible to humans through 2018 resulting in a complete lack of testing technologies.

No State official reviewed for accuracy or veracity any of the causal statements made in the Declaration of Emergency which contain false, misleading, and terror inducing statements.

In violation of well-established legal precedent from Jew Ho v. Williamson, 103 F. 10, 26 (C.C.N.D. Cal. 1900) and subsequent public health law, arbitrary and capricious rules were insinuated on part of the population that were not applied generally resulting in the unlawful confinement of a healthy population with no basis in science;

The Governor failed to provide adequate testing to confirm or deny the presence or absence of "a novel CV" and, based on recent reports from testing of incarcerated persons reported by Reuters, 96% of prisoners testing positive

for CV are asymptomatic demonstrating a failure to establish even a statistical link between the virus and the disease;

Neither the Governor nor any public health officer has followed evidence-based, peer-reviewed, clinical science showing that neither social distancing of up to 6 feet of separation nor the wearing of masks has any clinical effect in a healthy population and that instituting such policies is exclusively for the inducement of terror in the population;

As a result of these and other established facts, your orders and those that follow from these orders issued in violation of the State Constitution are illegal and unenforceable. I hereby demand that you immediately cease and desist in your suspension of my Constitutional rights.

Assertion:

On April 25, 2003, the United States Department of Health and Human Services Centers for Disease Control and Prevention (hereinafter, "CDC") filed an application for a United States (Application Number CV isolated from humans". Claim 3 – US46592703P, subsequently issued as U.S. Patent 7,776,521) entitled "A method of detecting a severe acute respiratory syndrome-associated CV (SARS-C 19) in a sample…; and, Claim 4 – A kit for detecting a severe acute respiratory syndrome-associated CV (SARS-C 19) in a sample…, provided the CDC with a statutory market exclusion right the detection of and sampling for severe acute respiratory syndrome-associated CV (SARS-C 19). Securing this right afforded the CDC exclusive right to research, commercially exploit, or block others from conducting activities involving SARS-C 19 since 2003. On September 24, 2018, the CDC failed to pay the required maintenance fees on this patent and their rights expired with no notification issued by CDC alerting the private sector to this decision.

From April 2003 until September 2018, the CDC owned SARS-C 19, its ability to be detected and the ability to manufacture kits for its assessment. During this 15-year period, the effect of the grant of this right — ruled unconstitutional in 2013 by the United States Supreme Court in the case of Association for Molecular Pathology et al. v. Myriad Genetics – meant that the

commercial exploitation of any research or commercial activity in the United States involving SARS-C 19 would constitute an infringement of CDC's illegal patent.

It appears that, during the period of patent enforcement and after the Supreme Court ruling confirming that patents on genetic material were illegal, the CDC and National Institute of Allergy and Infectious Diseases led by Anthony Fauci (hereinafter "NIAID" and "Dr Fauci", respectively) entered into trade among States (including, but not limited to working with Ecohealth Alliance Inc.) and with foreign nations (specifically, the Wuhan Institute of Virology and the Chinese Academy of Sciences) through the 2014 et seq National Institutes of Health Grant R01AI110964 to exploit their patent rights.

It further appears that, during the period of patent enforcement and after the Supreme Court ruling confirming that patents on genetic material was illegal, the CDC and National Institute of Allergy and Infectious Diseases (hereinafter "NIAID") entered into trade among States (including, but not limited to working with University of North Carolina, Chapel Hill) and with foreign nations (specifically, the Wuhan Institute of Virology and the Chinese Academy of Sciences represented by Zheng-Li Shi) through U19AI109761 (Ralph S. Baric), U19AI107810 (Ralph S. Baric), and National Natural Science Foundation of China Award 81290341 (Zheng-Li Shi) et al. 2015-2016.

It further appears that, during the period of patent enforcement and after the Supreme Court ruling confirming that patents on generic material was illegal, the CDC and NIAID entered into trade among States (including, but not limited to working with University of North Carolina, Chapel Hill) and with foreign nations to conduct chimeric construction of novel CV material with specific virulence properties prior to, during, and following the determination made by the National Institutes for Health in October 17, 2014 that this work was not sufficiently understood for its biosecurity and safety standards.

In this inquiry, it is presumed that the CDC and its associates were: a) fully aware of the work being performed using their patented technology; b) entered into explicit or implicit agreements including licensing, or other

consideration; and, c) willfully engaged one or more foreign interests to carry forward the exploitation of their proprietary technology when the U.S. Supreme Court confirmed that such patents were illegal and when the National Institutes of Health issued a moratorium on such research.

Reportedly, in January 2018, the U.S. Embassy in China sent investigators to Wuhan Institute of Virology and found that, "During interactions with scientists at the WIV laboratory, they noted the new lab has a serious shortage of appropriately trained technicians and investigators needed to safely operate this high-containment laboratory." The Washington Post reported that this information was contained in a cable dated 19 January 2018. Over a year later, in June 2019, the CDC conducted an inspection of Fort Detrick's U.S. Army Medical Research Institute of Infectious Diseases (hereinafter "USAMRIID") and ordered it closed after alleging that their inspection found biosafety hazards. A report in the journal Nature in 2003 (423(6936): 103) reported cooperation between CDC and USAMRIID on CV research followed by considerable subsequent collaboration. The CDC, for what appear to be the same type of concern identified in Wuhan, elected to continue work with the Chinese government while closing the U.S. Army facility.

The CDC reported the first case of SARS-C 19 like illness in the United States in January 2020 with the CDC's Epidemic Intelligence Service reporting 650 clinical cases and 210 tests. Given that the suspected pathogen was first implicated in official reports on December 31, 2019, one can only conclude that CDC: a) had the mechanism and wherewithal to conduct tests to confirm the existence of a "novel CV"; or, b) did not have said mechanism and falsely reported the information in January. It tests credulity to suggest that the WHO or the CDC could manufacture and distribute tests for a "novel" pathogen when their own subsequent record on development and deployment of tests has been shown to be without reliability.

Around March 12, 2020, in an effort to enrich their own economic interests by way of securing additional funding from both Federal and Foundation actors, the CDC and NIAID's Dr Fauci elected to suspend testing

and classify C 19 by capricious symptom presentation alone. Not surprisingly, this was necessitated by the apparent fall in cases that constituted Dr. Fauci's and others' criteria for depriving citizens of their 1st Amendment rights.

At present, the standard according to State and Territorial Epidemiologists Interim-20-ID-01 for C 19 classification is in outpatient or tele-health settings at least two of the following symptoms:

1.) Fever (measured or subjective)
2.) Chills
3.) Rigors
4.) Myalgia
5.) Headache
6.) Sore throat

New olfactory and taste disorder(s) at least one of the following symptoms:

1) Cough
2) Shortness of breath
3) Difficulty breathing

Severe respiratory illness with at least one of the following:

1) Clinical or radiographic evidence of pneumonia, or
2) Acute respiratory distress syndrome (ARDS).
3) AND No alternative more likely diagnosis

Laboratory Criteria for Reporting

Detection of SARS-C 19-2 RNA in a clinical specimen using a molecular amplification detection test.

Detection of specific antigen in a clinical specimen.

Detection of specific antibody in serum, plasma, or whole blood indicative of a new or recent infection serologic methods for diagnosis are currently being defined

After inflicting grave harm to the citizens of the United States of America in economic hardships resulting from their allegation of an "epidemic" or "pandemic", the CDC and the NIAID set forth, and the President of the United States and various Governors in the respective States promulgated, standards for lifting conditions in violation of the 1st Amendment to the Constitution that serve exclusively to enrich them. Both the presence of a vaccine or treatment and, or, the development of testing — both that solely benefit the possible conspiring parties and their co-conspirators — are set as a condition for re-opening the country. This appears to be an unambiguous violation of the Sherman Act and, if so, should be prosecuted immediately to the full extent of the law.

The CDC and WHO elected to commit to a narrative of a novel CV – exhibiting properties that were anticipated in the U.S. Patent 7,618,802 issued to the University of North Carolina Chapel Hill's Ralph Baric – and, in the absence of testing protocols, elected to insist that SARS-C 19-2 was the pathogen responsible for conditions that were consistent with moderate to severe acute respiratory syndrome.

U.S. Constitution

Article One, Section 8, clause 8

To promote the progress of science and useful arts, by securing for limited times to authors and inventors the exclusive right to their respective writings and disC 19eries

By Renewing their Illegal Patents on February 17, 2014 the CDC violated Article 1, Section 8, Clause 8 of the U.S. Constitution

By Renewing their Illegal Patents on February 17, 2014 the CDC willfully violated the law using taxpayer funds in light of the Supreme Court ruling on June 13, 2013

Article One, Section 9, clause 2

Which states that "The privilege of the writ of habeas corpus (a recourse in law challenging the reasons or conditions of a person's confinement) shall not be suspended, unless when in cases of rebellion or invasion the public safety may require it."

THERE IS NO CLINICAL DATA SHOWING THAT THE RESTRAINT OF HEALTHY INDIVIDUALS HAS ANY EMPIRICAL DATA SUPPORTING ITS USE. NO EVIDENCE SUPPORTING EMERGENCY DECLARATIONS HAVE BEEN OFFERED WITH THE EXCEPTION OF STATEMENTS MADE BY COLLUDING PARTIES SEEKING TO BENEFIT FROM VACCINATIONS, TESTING OR THE COMBINATION – NEITHER OF WHICH CAN BE REASONABLY EXPECTED GIVEN PATENTS GRANTED TO AND HELD BY COLLUDING PARTIES.

Sherman Act and Clayton Act violations receiving and directing funding only to those parties colluding around the infringement of the CDC's illegal patent.

CDC; NIAID; University of North Carolina, Chapel Hill; Wuhan Institute of Virology; National Institutes of Health; U.S. Department of Health and Human Services; President's Task Force; Governors except North Dakota, Nebraska, Arkansas, Utah, Wyoming, South Dakota, and Oklahoma

Possible violation of 15 U.S. Code § 19

Dr. Fauci is on the Leadership Council of the Bill and Malinda Gates •Global Vaccine Action Plan

DOMESTIC TERRORISM – Still in Effect Until March 15, 2020

Section 802 of the USA PATRIOT Act (Pub. L. No. 107-52) expanded the definition of terrorism to C 19er "'"domestic,"" as opposed to international, terrorism. A person engages in domestic terrorism if they do an act "dangerous to human life" that is a violation of the criminal laws of a state or the United States, if the act appears to be intended to: (i) intimidate or coerce a civilian

population; (ii) influence the policy of a government by intimidation or coercion;

Lastly current policing, fining, arrests and harassment throughout the country and CA/Orange County in this case, is in violation of not only First Amendment "abridging the right of people to peaceably assemble" but more narrowly:

Title 18 U.S.C., Section 242 Deprivation of Rights Under Color of Law:

Whoever, under color of any law, statute, ordinance, regulation, or custom, willfully subjects any person in any State, Territory, Commonwealth, Possession, or District to the deprivation of any rights, privileges, or immunities secured or protected by the Constitution or laws of the United States, or to different punishments, pains, or penalties, on account of such person being an alien, or by reason of his color, or race, than are prescribed for the punishment of citizens, shall be fined under this title or imprisoned not more than one year, or both; and if bodily injury results from the acts committed in violation of this section or if such acts include the use, attempted use, or threatened use of a dangerous weapon, explosives, or fire, shall be fined under this title or imprisoned not more than ten years, or both; and if death results from the acts committed in violation of this section or if such acts include kidnapping or an attempt to kidnap, aggravated sexual abuse, or an attempt to commit aggravated sexual abuse, or an attempt to kill, shall be fined under this title, or imprisoned for any term of years or for life, or both, or may be sentenced to death.

As a concerned Patriot, proud American and citizen of this country/county, I willfully submit the above statements for your consideration. It is my assertion that the above facts be considered for the immediate removal and suspension of any and all continued unlawful, unconstitutional, and draconian measures affecting citizens.

Henceforth any measures related and known as 'shelter in place,' quarantine, 'non-essential' work, social distance, and the closure of public spaces will be considered unconstitutional and nothing more than an attempt at

'social engineering.' Finally, I request your support and immediate investigation of any 'sworn' Governmental official at local, State or Federal levels for their willfully complicit or knowing criminal misconduct of their Constitutional duties in the service of their office.

In closing, I welcome your correspondence and am hopeful that you take this matter seriously on behalf of my family and fellow US citizens currently being impacted by the 'illegal' actions outlined above. Lastly, I will be submitting this same letter to all related local, State and Federal Gov't representatives including the Attorney General for considered legal action on behalf of myself and fellow citizens.

Sincerely yours,

____

Date: _____________

The Ninth Gate of Bill

What does "The Ninth Gate "mean in Roman Polanski's film noir, ***The Ninth Gate***?

The Ninth Gate is the last of nine gates that, when each is correctly passed through, are reputed to conjure, or lead to Lucifer. They are described in ***Novem Portis de Umbrarum Regni*** (***The Nine Gates of the Kingdom of Shadows***), a book written in the 17th century by Aristide Torchia. The author adapted the book from one written by the Devil himself and was burned for heresy. "The Nine Gates" purportedly contains the means to summon the Devil and acquire invincibility and immortality.

The Nine Gates

Gate 1) Mass Panic and Fear

Gate 2) Information Control and Censorship

Gate 3) Medical Martial Law with Quarantine and Social Distancing

Gate 4) Partial Reopening After the World Protests the Lockdown

Gate 5) Fake Announcement of New Spikes, Post Partial Reopening, with the Announcement of an mRNA Based Vaccination

Gate 6) Military Martial Law with the Introduction of Checkpoints and Incarceration for Offenders

Gate 7) Mandatory Vaccinations with Quantum Dot Digital Vaccination Certification Tattoos

Gate 8) Massive Worldwide Sickness and Death in the Millions from the Vaccinations

Gate 9) Introduction of Further Vaccinations to Combat Failed Vaccines

The Aftermath

- Vaccine Related Genocide in the Billions…a Scale Never Seen Before in all Human History
- The Implementation of the Fully Digital 5G New World Order Surveillance and Control Grid System to Maintain the Remaining Survivors in Work Farms as Slaves to the Technocratic Elite
- The Unveiling of the Antichrist

Enter Gate 5

Mandated mRNA vaccines are coming.

The fear campaign of C 19 is failing. People are not scared any longer of C 19. They are seeing though the fakeness of the news reports, starting to realize that the whole thing was a hoax to pressure them into accepting vaccines. These vaccines will be produced by Moderna. (CAMBRIDGE, Mass.--(BUSINESS WIRE)--May 18, 2020-- Moderna, Inc., (Nasdaq: mRNA).

Moderna, a clinical stage biotechnology company pioneering messenger RNA (mRNA) therapeutics and vaccines, has been commissioned by the Bill and Melinda gates Foundation to create a new generation of transformative medicines for C 19 patients They have announced positive interim clinical data of mRNA-1273, its vaccine candidate against Novel CV (SARS-C 19-2), from the Phase 1 study led by the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health (NIH).

The problem is that C 19 scam failed and now we are seeing the Technocratic Elite flex their muscles in the fear and terror of losing the control that they had won in the Phase 1 of the worldwide panic that they instilled in people with the initial fake virus announcement. It will not work a second time. The hospitals were empty. Nobody was dying except on tv, in addition to common yearly elderly deaths from natural causes or the common flu, but no C 19 in sight anywhere.

Subsequently, they need to release the vaccinations quickly so that real death and genocide will occur, and then they can say "See, we were right all along. And now you need to do exactly what we say." The chess game of totalitarian control shall speedily unfold before our very eyes. Make no mistake, a mandatory vaccine campaign will be implemented, and though it will begin as voluntary, it will swiftly metamorphosize into, "Take the vaccine, or you cannot leave your home for any reason, food included."

They will starve you to force your hand, enforced by military backed, state legislature. Without the quantum dot digital vaccination certification tattoo you will not be able to buy any food, or even enter a store, nor shop online, because a digital authentication from your tattoo's unique bar code signature must be used to shop online, as well. This roll out will come out very quickly, so you'll have no choice but to comply since you're stuck in your house, starving.

The Vaccines are mRNA vaccines infused with synthetic nano tech. MRNA vaccines have ALLEGEDLY elicited potent immunity against infectious disease targets in animal models of influenza virus, Zika virus, rabies virus and others, especially in recent years, using lipid-encapsulated or naked forms of sequence-optimized mRNA. This strategy literary changes the genetic code of the DNA in Epigenetic real time. Why is this relevant. Well, mRNA viruses carry the instruction to replicate and build its viral protein right away. It doesn't require anything other than the host cell machinery to operate. In other words, it cuts down the manufacturing process significantly.

Why is that a problem? Well, mRNA has direct coding. It will do what they are programmed it to do. In this case, the RNA causes direct DNA mutation which easily leads to cancer. They can manipulate your emotions, give you autoimmune diseases, autism, anything that it is programmed to do. None of these vaccines will be properly tested, but nevertheless, they will be unleashed upon the general population like lab rats.

There is no CV vaccine and there never will be one. CVes constantly mutate, and that is why there has never been an effective Vaccine for the common cold, nor a workable one for the common flu. The C 19 Vaccine is s

hoax. The idea of a cure is a hoax, as well. You have an immune system for that. It knows what to do with the flu, is all that C 19 actually is.

Prepare for Gate 6

Military Martial Law with the Introduction of Checkpoints and Incarceration for Offenders

Gates in a Nutshell

1) Event 201 = Gates
2) ID2020 = Gates
3) CV patent = Gates
4) C 19id vaccine = Gates
5) WHO/NIAID/CDC/UN funding = Gates
6) Fauci/Birx/Tedros funding = Gates
7) New Economy based on Human Activity (Patent number=WO2020060606A1 {666}) = Gates
8) Hypothesize a simulated global outbreak, required steps, various phases, overall timeline and expected outcomes (Rockefeller – Lock Step, 2010)
9) Create a very contagious but super low mortality rate virus to fit the needed plan (SARS/HIV hybrid research strain created at Fort Detrick class 4 lab from 2008-2013 as part of a research project to find out why CV's spread like wildfire in bats but have an extremely hard time infecting humans (Hence the 4 HIV inserts, aka the missing key to infect the human ACE-2 receptor)
10) Create a weaponized version of the virus with a much higher mortality rate as a "BACKUP plan" ready to be released in phase 3 BUT ONLY IF NEEDED (SARS/HIV/MERS weaponized Trybrid strain created at Fort Detrick class 4 lab in 2015)
11) Transport the research strain to a different class 4 lab (National Microbiology Lab in Winnipeg Canada) and have it stolen and

smuggled out by China (Shi Zhengli) on purpose and taken to China's only class 4 lab (Wuhan Institute of Virology in Wuhan China) for added plausible deniability and to help cement the wanted BACKUP public script as something to fall back on IF needed (primary script being its natural, backup script being that China created it.

–Dan O Shay

C 19 PLANdemic Phase 2

1st Wave Was A Hoax/Normal Flu

"They" know that a small part of the population will see through it and minimize the pandemic threat vocally. Some people will also loudly protest the lockdown and social distancing.

2nd Wave Will Be Real, With Lots of Death

Through recently installed 5G which starts "beam-forming" on people's heads/chests preventing oxygen uptake (remember, 5G Is 60Ghz which is the frequency of oxygen hemoglobin uptake) , which will produce respiratory distress Identified as C 19 symptoms.

People of all ages will be dying, even the young, since 5G has been installed in schools this will:

1) Totally discredit researchers, patriots, citizen reporters, truthers, or anybody else that questioned the government narrative and seriousness of the 'pandemic'

2) Discredit lockdown protesters as irresponsible, destroying possibility of any future protest

3) Destroy the premise that only the old are vulnerable

4) Cause a massive and harsh lockdown, worse than before, accompanied by internal border checkpoints. With virtually no resistance whatsoever.

-- Dan O Shay

WE are the Answer We Have Been Looking For

My friends,

We are seeking outside of ourselves the changes we want to see happen in this, our world. We are programmed to seek authority's approval, guidance, leadership and saving. From the time of our infancy, we are indoctrinated in a heavy-handed guidance amongst the rules of home, schools, employment, churches and temples and the laws of state and federal governments. We are so inherently incompetent and foolish that we need to be policed not just by local and state authorities but also by federal organizations that must keep an eye on us all through cameras, ID numbers, bank accounts and devices like our phones and televisions. Overall, from our mother's wombs where doctors now ultrasound our fetuses to throughout our lives, we are monitored, photographed and governed by authority.

Now, in this time of great upheaval, we, above all else, seek "authority and leadership" to save our asses somehow, some way, no matter what it takes. So we implore our governments and our leaders to do something to make us feel safe and cared for. Protected at all costs so we can return to our lives of

boring routines, 9 to 5 jobs, paying our taxes, raising our children, having Saturday night sex and playing on social media with the tv blasting in the background to drown out our thoughts and our ultimate suffering we won't look at or feel.

The problem is, the very people we seek our salvation through are the very ones who are causing all of our suffering. We are asking our abusers to protect us from our abusers. Ironic isn't it? It's classic to the narcissistic/victim paradigm in which the elitists nurture and count on to occur.

But let me let you in on a secret here. There is NO ONE, not one "higher authority" coming to rescue you or me or anyone of us. No government. No president, prime minister, religious leader, prince, or queen. Nor is there a God or Supreme Being or an alien race coming to save us. That's not how this works and I'll tell you why. And here is the secret that those in "higher authority" are hiding from you. Ready?

YOU and I are the ones we've been waiting for.

(pause)

Now, I will say it again. YOU and I and todays humanity are the ONES we've been waiting for. PERIOD.

We were sent and we chose to come here, at this time, to be the ONES OF CHANGE. To lead humanity out of this. To protect our children and bring them home to innocence and sanity. To throw down our shackles and take up our arms of unity, freedom, and spiritual liberation together. Not fighting each other but creating swells against the very system that is destroying us now, soundly.

Right now, get up and throw away all fluoride in your bathroom. Throw out every one of your damn chemicals. Turn off the tv. Gather with those of us who are truly fighting the Great Battle for our spiritual liberation. Learn everything. Grow with a vastly open mind. BECOME the WAY of peace and fierceness in this sea of bedlam.

Buy pure whole foods. Pull your children from government schools. Protect them. Stop all vaccines. Form groups to save those children stolen. Be their voice. Get out there and fight in every city 5g, geoengineering, trafficking, GMO foods, abortion, fetal cells in our foods. Galvanize hard core gatherings of protest that is by mass majority and not by raging and swords. They want that so fuck 'em. Don't give them anything they want. Dignity with personal power is our surplus. Mass consent or mass resistance. Universal Law must honor how our human majority chooses.

But most of all, look to your own humanity and rise within it. Look to those next to you. We are in this together. WE ARE THE WARRIORS OF LIGHT. Let us never fight amongst ourselves. We are the alliance. We are who has come to save us so protect each one of us and love! Love each other fiercely. Do not divide! Choose to understand that humans are beyond color, borders, religions, gender, anything that separates us. Move beyond that, ALL OF US.

Nowhere in nature does the cat say to the dog, "I hate you because you have spots." Or the dolphin says to the shark, "I hate you because you are a shark." There is no division or separate mind in nature, but we have divided because we are TAUGHT and EXAMPLED division. But if we carry it, then that's on us. Whites, blacks, brown's, reds, yellows, mixed, male, female, Jewish, Christian, Muslim, Atheist. We are all dividing, and it must stop! Right now! Enough is enough! Our blood is human blood and we stand with one heartbeat pounding fiercely unified solidly!

We are the human race and we are here to solve our problems and reclaim our futures. We have come to protect our children and every life given to this planet that is born from her dirt and her sand and her waters. The parasitic archon and anu's and other dark forces DO NOT BELONG on this OUR planet. They entered this plane (planet means plane of existence) and they are consuming it.

Our only task is to REMOVE THEM NOW.

As Bush Sr. said, "If the people (meaning humans) knew what we have done, they would hunt us down and hang us in the streets."

Think on that.

We are the answer, my friends and… it is time to rise!

--Raven White Dove

Table of Contents

Chapter 1
All the World's a Jesuit Stage

To understand the current CV Pandemic Hoax, one needs to understand the character of the forces behind it. And rest assured, those are Jesuit forces. And so, let us review the Vatican Jesuit Military Order, also known as The Society of Jesus…which should never be confused with authentic Christianity.

This Jesuit script will include:

1. Digital Tracking Inquisition
2. Communist Style Social Credit Score Phone Apps
3. Contact Tracing Facilitated Through Real Time Proximity, Digital, and Blockchain Transactions

This will give the Jesuit Vatican full totalitarian control over any who buy and sell. This New Age Union of all religions and governments, in alliance against the fake Pandemic, will be governed by Jesuit UN Papal Authority.

When they say, it is all for your safety, they mean it is all for your enslavement.

Jesuit Agents: Dr. Francis S. Collins, Anthony Fauci, and Bill Gates

Dr Francis S. Collins is a Jesuit (Vatican Catholic) affiliated geneticist and physician who is director of the National Institutes of Health outside Washington in Bethesda, Maryland, USA, is the 2020 Templeton Prize Laureate. Collins, who led the Human Genome Project to its successful completion in 2003, has advocated for the integration of faith and reason

throughout his career. He is a member of the Vatican's Pontifical Academy of Sciences, appointed by Pope Benedict XVI in 2009. The Templeton Prize, established in 1972 by Sir John Templeton, aims to recognize someone "who has made an exceptional contribution to affirming life's spiritual dimension, whether through insight, disC 19ery or practical works."

The announcement was made online at TempletonPrize.org on 20th May by the Templeton philanthropies: The John Templeton Foundation in West Conshohocken and by the Templeton World Charity Foundation and Templeton Religion Trust in Nassau, Bahamas.

In a statement, Collins, who has headed NIH since 17th August 2009, said that "almost my every waking moment is consumed by the effort to find treatments and a vaccine for C 19. … I grieve at the suffering and death I see all around, and at times I confess I am assailed by doubts about how a loving God would permit such tragedies. But then I remember that the God who hung on the cross is intimately familiar with suffering … (and is) 'our refuge and strength' (Psalm 46)."

The Jesuit Created CV Pandemic Hoax

The Vatican Jesuits didn't just curve the Earth with their Heliocentric mind control in the 15th Century, hypnotizing the world into a Copernican Cosmological illusion. They also curved, twisted, and perverted the moral sensibilities of Mankind, robbing him of any decency, indoctrinating him into a Luciferian mindset, and filling him up with carnal and Satanic mesmerism and Gnostic Transhumanistic filth. On every front: social media, entertainment, news, business, spirituality, science, education, military, medical, political, etc…you will find the hidden hand of Jesuit fingerprints. They lurk in the shadows and blend in to avoid detection and persecution, seldom if ever taking leadership roles, but rather, preferring to position their Masonic, Jewish, Illuminati, and Papal Pawns in the limelight to propel their sinister machinations for a Luciferian New World Order forward. You'll always find a Jesuit created proxy war in a third world country where the Jesuits keep their

hands clean while their stooges and pawns fight to the death to perpetuate Chaos and the Hegelian Dialectic, resulting in reformation towards Jesuit goals.

Additionally, though many believe The Jews to by "The Synagogue of Satan" and target them as the instigators of The New World Order, as ***The Protocols of The Learned Elders of Zion*** would seem to suggest, upon closer scrutiny, it becomes readily apparent that The Jews were, and still are ,merely Papal Puppets to help front and manage The Jesuit agenda for a New World Order. Every leader is now a puppet. They are all in the same club, answering to the same Master of Puppets. An all-powerful, ancient, Jesuit-run organization is pulling the strings on everything around us, shaping local, federal, and international economy, starting wars, and pretending that they are enemies because that keeps them in power so they can introduce even tighter Draconian measures in each of their respective territorial dominions.

The common theme here is about a New World Order, where a secretive Power Elite with an Imperialistic Agenda is conspiring to eventually rule the world through an authoritarian, technocratic world government, which will replace sovereign nation-states. They employ an all-encompassing propaganda, terrorist, business, banking, entertainment, news media, medicine, and military mechanism, whose core ideology continually hails evolutionary theory and the establishment of a New World Order as the culmination of history's evolutionary progress.

The Jesuits are behind:

- Darwinism
- Evolutionary Theory
- The Big Bang
- The Copernican Heliocentric Theory
- Gravity
- The Suppression of The Enclosed Cosmological View
- NASA
- The New World Order
- The Assassination of JFK

- The Assassination of Abraham Lincoln
- The Assassination of George Washington
- Hollywood
- The Federal Reserve
- The Creation and Fall of Adolph Hitler
- 9-11
- The Current Jesuit Pope Francis
- The New Age Movement
- Feminism
- Communism
- Fascism
- The Rise of UNWARRANTED Anti-Semitism
- The Suppression of WARRANTED Crypto-Khazarian Mafia (Posing as Sephardic Jews) Condemnation
- International Education and Curriculum
- They Wrote Mein Kampf
- The United States Corporate Empire
- All Major Wars for the Last 200 Years
- The Destruction of Christianity
- International Condemnation of The Bible
- The French Revolution
- The Napoleonic Wars
- The Bolshevik Revolution
- The Creation of Islam
- Alex Jones is Afraid to Speak of Them
- The Alien Agenda
- Vatican Two
- All the World's Wealth and Resources
- All Geographical Areas of the World Through Their Control of Every Government

- All Major Terrorism Acts
- All Major US Presidents and Politician
- Foreign Policies of All Countries
- Drug and Porn Industry
- Organized Crime and MAFIA in All Countries
- American Italian MAFIA
- They Are or Are Behind All Major Protestant Pastors and Orators
- They Are Behind the Network of Secret Societies and Mystery Schools
- International Think Tanks
- International Educational Groups
- All Kingships and Monarchies
- The Current Pope is a Jesuit, Pope Francis
- They Were Banned from Over 83 Countries
- The Jesuits were Exposed by Bill Cooper Before They Killed Him
- Jesuits were Behind the Construction and Sinking of The Titanic
- The Jesuits Were Exposed by David Icke
- They Were Exposed by Eric Phelps
- Starting of WWI, WWII, and Currently Igniting WW III

The Jesuits killed Abraham Lincoln:

"The American Civil War would never have been possible without the sinister influence of the Jesuits."

--Abraham Lincoln (1809-1865; 16th President of the United States)

Freemasonry is, essentially, a Jesuit offshoot:

"If you trace up Masonry, through all its Orders, till you come to the grand tip-top head Mason of the World, you will disC 19er that the dread individual and the Chief of the

Society of Jesus [i.e., the Superior General of the Jesuit Order] are one and the same person."

- James Parton (American historian)

The creation of The Illuminati was by Jesuit Agent, Adam Weishaupt:

"Jesuit-trained Illuminist, Adam Weishaupt, and his fellow Jesuits cut off the income to the Vatican by launching and leading the French Revolution; by directing Napoleon's conquest of Catholic Europe, and by eventually having Napoleon throw Pope Pius VII in jail at Avignon until he agreed, as the price for his release, to reestablish the Jesuit Order. This Jesuit war on the Vatican was terminated by the Congress of Vienna and by the secret, 1822 Treaty of Verona."

- Emanuel M. Josephson (American physician and historian)

The Jesuits marginalized and orchestrated the persecution of The Jews in Nazi Germany though their Zionist fronts:

"Why would the Jesuits use their implacable enemy, the Jews, to further their designs for world dominion? The Jesuits never do anything out in the open where they can be exposed. If they are recognized as the culprits, they will be blamed and suffer the consequences, but if they can use someone else as the 'cause of the world's problems', especially an enemy they can destroy in the process, then they have simultaneously accomplished two of their objectives. The Jewish people are the perfect scapegoat. Since the Rothschilds are Jesuit agents operating under a Jewish C 19er, using them in forming the Illuminati back in 1776 effectively throws the onus of this conspiracy on the Jews. The Rothschilds are certainly not the only Jesuit agents that operate under a Jewish front. History books will tell us that the French Revolution first began in 1787 or 1789, depending on which book you read. However, it was actually planned by Jesuit Dr. Adam Weishaupt and the House of Rothschild almost 20 years before the Revolution took place."

--William Sutton (Author of The New Age Movement and Illuminati 666)

All significant occurrences in politics and finance are indeed orchestrated by this highly influential Jesuit cabal who maintains political power through the financialization of the economy through Vatican supported banking mafia

headed by the Rothschild Zionist, international bankers. Nothing is left to chance in their advance towards world government, as they control every step of the way.

The Jesuits hold control through the regulation and restriction of speech through their concentration of media ownership, mass surveillance, widespread use of state false flag terrorism, and an all-encompassing propaganda machine that creates a cult of personality around puppet world leaders and ideologizes world government as the culmination of history's progress.

They operate through many front organizations, including The United Nations, The CFR, The Trilateral Commission, NAFTA, USAN, EU, OIC, OAU, SCO, APEC, The Vatican Church, etc...Historical and current events are indeed steps in an ongoing plot to achieve world domination through clandestine and overt political gatherings and decision-making.

- **Media is Manipulation**
- **History is a Lie**
- **Religion is a Control System**
- **Money is a Hoax**
- **Debt is a Fiction**
- **Government is a Corporation**
- **WE are Slaves to the System**
- **The System Is A Lie**
-

Ten Facts You Should Know About the Jesuits

The current Superior General is the Reverend Father Adolfo Nicolás. The Superior General of the Society of Jesus is the official title of the leader of the Roman Catholic religious order, the Jesuits. He is generally addressed as Father General. The position sometimes carries the derogatory nickname of the Black Pope. The current Superior General is the Reverend Father Adolfo Nicolás.

"Beware of false prophets, who come to you in sheep's clothing, but inwardly they are ravenous wolves." – Yahushua in Matthew 7:15 (NKJV)

"We came in like lambs and will rule like wolves." --Francesco Borgia, Third Jesuit Superior General

The Society of Jesus, more commonly referred to as the Jesuits, are the armed militia of the Roman Catholic Church. They were sanctioned in 1540 by Pope Paul III with one mandate: to defeat Protestantism and regain worldwide Papal rule. To achieve this monumental task, they employ ever-adapting methods of pseudo-education, social programs, infiltration, and all wickedness that could possibly be conceived. Needless to say, they are achieving great success in their mission, which is climaxing with the present pope, Pope Francis, i.e. the Eighth and last Pope of Revelation 17, who held some of the highest positions in Argentina, including Provincial Superior in the Society of Jesus and Archbishop of Buenos Aires. He was made a cardinal by Pope John Paul II.

Today most of the world is oblivious as to how Jesuits operate, from their inception to this very day. Now more than ever, World's Last Chance believes it is exceedingly important to bring up the following historical facts about this evil society, to expose the wicked nature of this truly malevolent order.

Fact #1

Pope Clement XIV abolished the Jesuits as a society in 1773:

It did not take long for the 18th Century Catholic nations to get tired of the meddling of the Jesuits into their national affairs. They were so infuriated against the Jesuits that they demanded the Roman Catholic Church abolish them once and for all. Sufficient political pressure was brought to bear on Pope Clement XIII. However, he passed away before he could do anything about it. The task of abolishing the Society of Jesus then fell on his successor, Clement XIV. As Clement XIV signed the decree abolishing the Jesuit Order he said, "I

have signed my death warrant." Within nine months, he was dead. [Many contemporaries considered his death a case of poisoning, and suspected the Jesuits were responsible].

Fact #2

No other entity on Earth was expelled and suppressed by Catholic and non-Catholic countries as the Jesuits:

Obviously, the Jesuits were not expelled from many nations (even Catholic nations) because of their educational or charity work. They were expelled for engaging in and carrying out subversive political plots against humanity to advance their own cause. Between 1555 and 1931 the Society of Jesus was expelled from at least 83 countries, city states and cities, for engaging in political intrigue and subversion plots against the welfare of the State, according to the records of a Jesuit priest, Thomas J. Campbell. Practically every instance of expulsion was for political intrigue, political infiltration, political subversion, and inciting to political insurrection.

The Jesuits are known for their deception, spying, infiltration, assassination, and revolution. They worked deep into the political field and plotted through politics throughout the world countries.

When the Jesuits are expelled from a country, they simply change strategies and return to the country they were expelled from under a new disguise. The following sums up their operational strategy:

"We came in like lambs and will rule like wolves. We shall be expelled like dogs and return like eagles."

--Francesco Borgia, Third Jesuit Superior General.

Fact #3

Hitler modeled his dreaded SS army and party after the organizational structure of the Jesuits and the Roman Catholic Church:

"…the SS organization had been constituted according to the principles of the Jesuit Order."

--"The Secret History of the Jesuits," by Edmond Paris, p. 164

Walter Schellenberg, former chief of Nazi counter-espionage made this statement: "The S.S. organization had been constituted by Himmler [Heinrich Himmler, leading member of the Nazi party] according to the principles of the Jesuit Order. Their regulations and the Spiritual Exercises prescribed by Ignatius of Loyola were the model Himmler tried to copy exactly. Himmler's title as supreme chief of the S.S. was to be the equivalent of the Jesuits' 'General' and the whole structure was a close imitation of the Catholic Church's hierarchical order."

--The Secret History of the Jesuits," by Edmond Paris, p. 164

Above all I have learned from the Jesuits. And so, did Lenin too, "far as I recall. The world has never known anything quite so splendid as the hierarchical structure of the Catholic Church. There were quite a few things I simply appropriated from the Jesuits for the use of the Party.

--Manfred Barthel, "The Jesuits: History and Legend of the Society of Jesus (New York, 1984), Adolf Hitler, p.266.

"I learned much from the Order of the Jesuits", said Hitler. "Until now, there has never been anything more grandiose, on the Earth, than the hierarchical organization of the Catholic Church. I transferred much of this organization into my own party. I am going to let you in on a secret. I am founding an Order. In my "Burgs" of the Order, we will raise up a youth which

will make the world tremble. Hitler then stopped, saying that he couldn't say any more.

Vatican connection to Nazis

Signing the concordat is Cardinal Pacelli (later to become Pope Pius XII). By 1933 he was the Vatican Secretary of State. Second from left is Franz von Papen, a sinister Nazi and devout Roman Catholic who was Hitler's ace diplomat and the Vatican's agent in helping to bring Hitler to power. Standing at the far right can be seen the little-known Vatican prelate, Montini, later to become Pope Paul VI.--"Hermann Rauschning, former national-socialist chief of the government of Dantzig: "Hitler m'a dit", (Ed. Co-operation, Paris 1939, pp.266, 267, 273 ss).

"The Fuhrer had come to power, thanks to the votes of the Catholic Zentrum [Center Party overseen by Jesuit Ludwig Kaas], only five years before 1933, but most of the objectives cynically revealed in Mein Kampf were already realized; this book . . . was written by the Jesuit controlled Father Bernhardt Stempfle and signed by Hitler. For . . . it was the Society of Jesus which perfected the famous Pan-German program as laid out in this book, and the Fuhrer endorsed it."

--Edmond Paris, The Secret History of the Jesuits, page 138

Franz von Papen, another powerful Nazi, who was instrumental in setting up the concordat between Germany and the Vatican had this to say: "The Third Reich is the first world power which not only acknowledges but also puts into practice the high principles of the papacy."

--http://www.chick.com/reading/books/153/153_03.asp

Fact #4

Jesuit Education

Over the last 400 years the Jesuits have succeeded in establishing the largest worldwide network of schools and universities. These prominent schools and universities have produced many well-known alumni. Thus, the Jesuits have been able to shape and mould the thinking of many famous world leaders and produce generations of political and religious leaders who were favorable to the Roman Catholic Church, and her doctrinal agenda.

The renowned British preacher, Charles Haddon Spurgeon, once warned about the church ministers who are graduating from these universities that "… they keep back a portion of the gospel … having studied in the devil's new Jesuitical college."

--Charles H. Spurgeon "A Solemn Warning for All Churches," Sermon No. 68

Fact #5

Agents of the Jesuits have been responsible for assassinating many heads of State over the centuries:

Heads of states were assassinated by the Jesuits, when they attempt to suppress the influence and meddling of the Jesuits in their national affairs. Of heads of states that are known to have been assassinated by Jesuits we mention for example: William of Orange, Kings Henry III and Henry IV of France, Czars Alexander I and Alexander II of Russia, President Abraham Lincoln and John F. Kennedy, and Mexican President Benito Pablo Juarez.

Jesuit connection to Lincoln assassination

Abraham Lincoln was fully aware of the evil nature of the Jesuits. He stated, "... it is not against the Americans of the South, alone, I am fighting. It is more against the Pope of Rome, his perfidious Jesuits and their blind and blood-thirsty slaves that we have to defend ourselves."

--Fifty Years in the Church of Rome, by Charles Chiniquy. p. 496

"It would seem that the Jesuits had had it in mind, from the beginning of the war [the American Civil War of 1861-1865], to find an occasion for the taking off [i.e., the assassination] of Mr. [Abraham] Lincoln."

--Thomas M. Harris (U.S. Army Brigadier General; Author of the book Rome's Responsibility for the Assassination of Abraham Lincoln)

"The favorite policy of the Jesuits is that of assassination."

--U.S. Army Brigadier General Thomas M. Harris; "Rome's Responsibility for the Assassination of Abraham Lincoln"; 1897; Page 19)

"It is of faith that the Pope has the right of deposing heretical and rebel kings. Monarchs so deposed by the Pope are converted into notorious tyrants and may be killed by the first who can reach them.

"If the public cause cannot meet with its defense in the death of a tyrant, it is lawful for the first who arrives, to assassinate him."

--Defensio Didei, Jesuit Suarez, Book VI. C 4, Nos. 13, 14]

Donald Freed remembers what apparently passes for polite conversation when men such as William Colby and Ray Cline get together. "It was quite bizarre" Freed said, "for the subject they chose was, 'When is it acceptable to assassinate a head of state?' Colby presented what he said was a theological and philosophically sound approach. "The Catholic Church," he said, "had long since wrestled with this question and had," to Colby's mind, emerged with a sound concept: "It is acceptable," he said, "to assassinate a tyrant." [Donald Freed is a friend of the author, Mark Lane. He organized a conference at USC for the U.S. intelligence community and its critics to meet. In the panel were Lane, Ellsberg and John Gerassi, all critics. On the other side were William Colby, former DCI (Director of Central Intelligence from September 1973 to January 1976), David Atlee Phillips, and Ray Cline, former deputy DCI's.

--Plausible Denial, Mark Lane, 1991, p. 85

Jesuit Connection to the Kennedy Assassination

President John F. Kennedy was another victim of appalling Jesuit wickedness. Once he outwardly distanced himself from the Papal agenda and stood for more liberal ideals and human rights, he was considered, by their standards, a traitor to the Vatican and a "tyrant" worthy of death.

This is an excerpt from "Vatican Assassins" by Eric Jon Phelps:

Knowing that President Kennedy was not going to escalate the Vietnam War, the Intelligence Community began to prepare for his assassination. Cardinal Spellman [Francis Spellman, Archbishop of New York from 1939-1967], through FDR, had arranged the release of "Lucky" Luciano. Now the Cardinal needed a favor. If refused, Spellman could use the entire intelligence community which he had helped to organize, to eliminate any mob boss. If agreed to, new gambling centers would open, Atlantic City in particular. Clearly, if the President [JFK] was removed, everybody would acquire more power and wealth, the intelligence community would become more absolute, and the Cardinal would be even more respected by his peers in Rome.

Later, in 1964, for the first time in history, the Pope of Rome set foot in Fourteenth Amendment America. Cardinal Spellman had performed well and was rewarded by a visit from his Master, fellow Cold Warrior and Vatican Ratline handler, Cardinal Montini, who was now Pope Paul VI. There is yet another reason for the removal of President Kennedy. He wanted to arm Israel. Loftus writes:

"In September 1962 Kennedy decided to supply Israel with defensive ground-to-air missiles capable of stopping aircraft, but not the Egyptian offensive missiles. It was the first arms sale by the U.S. Government to Israel.... Kennedy promised the Israelis that as soon as the 1964 election was over, he would break the CIA 'into a thousand pieces and scatter it to the winds'. With Kennedy's assassination in November 1963, the Israelis lost the best friend they had in the White House since Truman departed."

--The Secret War Against the Jews, John Loftus, 1994

And why did the Vatican's Jesuits not want any arms sales to Israel at this time? Why did the Jesuit-controlled President Johnson turn his back as the

Egyptian army moved up through the Sinai desert to prepare its assault on Israel in 1967? Because the attack upon Israel had to be provoked. That attack was provoked by the Jesuits' International Intelligence Community through Egypt falsely perceiving the weakness of the Israeli army and the supposed abandonment of Israel by the American Empire. The six-day war, engineered by Knight of Malta James Angleton, had one primary purpose: the taking of Jerusalem along with the Temple Mount. The apparent lack of military hardware on the part of Israel provoked the planned attack by Egypt. Therefore, Israel launched a preemptive strike, and, in six days, the holy city was in the hands of Rome's Zionist government.

Had Kennedy armed Israel, the Egyptians would never have been emboldened to maneuver for war. With no provoked war, there would have been no Israeli attack. With no Israeli attack, Jerusalem would never have been taken by the Zionists, controlled by the Jesuits' Mossad. With Jerusalem in Arab hands, the Zionists could never rebuild Solomon's Temple—unbeknown to them—for the Jesuits' "infallible" Pope,

"Who opposeth and exalted himself above all that is called God, or that is worshiped; so, he is God sitteth in the temple of God [Solomon's rebuilt temple], showing himself that he is God." -II Thes 2:4

It is safe to say that the Jesuit General, using the Pope with his most powerful Cardinal, assassinated President Kennedy.

--http://www.bibliotecapleyades.net/vatican/esp_vatican03.htm#THE JESUITS — 1945-1990

One might assume that this emotive painting would hang somewhere in Dallas, Texas or perhaps in the Smithsonian. And one would be wrong on both counts. This painting of President John F. Kennedy's gruesome assassination, by Mark Balma, hangs in the Vatican Cathedral of St. Paul. The painting is entitled "Pietà" after Michelangelo's famous sculpture of Mary holding the body of the crucified Christ, which is also located at the Vatican. Isn't this a macabre way to "celebrate" the life of perhaps America's most beloved

President? or is this rather an homage to the Jesuit agenda, serving as a stern warning/reminder to those willing to cross them?

Fact #6

The Jesuits today control all the powerful secret societies that are shaping the New World Order

"The list of secret societies being controlled by the Jesuits today include: the Freemasonry, the Knights of Malta, the Bilderberg group, and the higher levels of the Knights of Columbus, and the highest levels of Opus Dei – and all the subgroups that fall under these powerful entities."

--http://www.toughissues.org/the%20jesuit%20oder.htm

"There are still men and women about the country, who will tell you, with grim gravity that, if you trace up Masonry, through all its Orders, till you come to the grand tip-top, head Mason of the world, you will disC 19er that the dread individual and the Chief of the Society of Jesus are one and the same person!"

--James Parton, 1855, American Historian, The Black Pope, M.F. Cusack, (London: Marshall, Russell & Co., 1896) p. 76.

If the above is true, then the example below would be a meeting of two of the most powerful men on Earth! The Head of the Jesuits and the Pope, who is also a Jesuit.

Fact #7

The Jesuits are responsible for fomenting the two world wars and escalating the Vietnam War after President Kennedy's assassination:

"The public is practically unaware of the overwhelming responsibility carried by the Vatican and its Jesuits in the starting of the two world wars – a situation which may be explained in part by the gigantic finances at the disposition of the Vatican and its Jesuits, giving them power in so many spheres, especially since the last conflict."

--Edmond Paris, The Secret History of the Jesuits, page 9

The documented atrocities committed by the Jesuits, particularly those under the **Ustachi** (or Ustaše) are particularly disturbing and shocking, especially since there are actual photographs of such evil. This didn't happen hundreds or thousands of years ago. It happened in the 1940's. For many in Yugoslavia it was either convert to Catholicism or be brutally tortured and killed.

Fact #8

After Pope Pius VII was freed from exile in 1814, his first order of business upon returning to Rome was to restore the Jesuit order

The papacy suffered great humiliation at the hand of Napoleon. Thus, right after the defeat of Napoleon in 1814, Pope Pius VII was freed from imprisonment and was returned to Rome. The need to restore the Jesuit militia became an urgent matter. Rome did not want to be deprived again of the services of the Jesuits, no matter how burdensome this service was to the Church of Rome, and its allies.

"In the agreement to rescue Rome [i.e., the Roman Catholic Church's hierarchy] from the predicament of losing its world control to Protestantism, and to preserve the spiritual and temporal supremacy which the popes [had] 'usurped' during the Middle Ages, Rome now 'sold' the [Roman Catholic] Church to the Society of Jesus [i.e., the Jesuits]; in essence the popes surrendered themselves into their hands."

--John Daniel ("The Grand Design Exposed"; 1999; Page 64)

Fact #9

The Jesuit Order took over the Office of Inquisition shortly after it was sanctioned, and this led to the martyrdom of millions of saints

In 1254 Pope Alexander IV established the Office of the Inquisition. The first inquisitor was Dominic, who was the founder of the Dominican order of monks.

However, shortly after Pope Paul III sanctioned the Society of Jesus, the Office of Inquisition was revived and the Pope gave free reign to the Jesuits to run this office, and the inquisitor Generals were granted exceptional powers in carrying out their mandate to root out of all "heretics." This caused the martyrdom of millions of saints.

The quotes below show the effect of Jesuits taking over the Office of the Inquisition:

"Need I speak to you of the thirty years' war in Germany, which was mainly instigated by the Jesuits, in order to deprive the Protestants of the right of free religious worship, secured to them by the treaty of Augsburg? Or of the Irish rebellion, of the inhuman butchery of about fifteen million Indians in South America, Mexico and Cuba, by the Spanish papists? In short, it is calculated by authentic historians, that papal Rome has shed the blood of sixty-eight million of the human race in order to establish her unfounded claims to religious dominion." Source: Dr. Brownlee's "Popery an enemy to civil liberty", p. 105

"This was the century of the last religious wars in "Christendom," the Thirty Years' War in Germany, fomented by the Jesuits, reducing the people to cannibalism, and the population of Bohemia from 4,000,000 to 780,000, and of Germany from 20,000,000 to 7,000,000, and making Southern Germany almost a desert, ..."

--Cushing B. Hassell, History of the Church of God, Chapter XVII.

Writing about the Jesuits, John Lord states:

"They are accused of securing the revocation of the Edict of Nantes, --one of the greatest crimes in the history of modern times, which led to the expulsion of four hundred thousand Protestants from France, and the execution of four hundred thousand more."

--John Lord, Beacon Lights of History, volume VI, p. 325.

"In Bohemia, by 1600, in a population of 4,000,000, 80 per cent were Protestant. When the Hapsburgs and Jesuits had done their work, 800,000 were left, all Catholics."

--Henry H., Pocket Bible Handbook, Chicago, 13th edition, 1939, p. 790.

Fact #10

The Jesuits succeeded in their destructive agenda through dominating the confessor field wherever they went

"The Jesuits became the predominant group supplying confessors to (meaning, hearers of the confessions of) kings and princes and those in authority. As the New Catholic Encyclopedia says, "they acted as royal confessor to all French kings for 2 centuries, from Henry III to Louis XV; to all German emperors after the early 17th century; to all Dukes of Bavaria after 1579; to most rulers of Poland and Portugal; to princely families throughout Europe.

"As advisors to kings, they influenced political policy. A royal confessor was not slow to tell a king that he had a duty to make the kind of political alliances that would promote the temporal interests of the Church. It was Le Tellier, Jesuit confessor to Louis XIV, who in the 1680's persuaded that monarch to revoke the Edict of Nantes, which granted religious liberty to Protestants."

The Jesuits are even confessors of popes. "The Pope's confessor, an ordinary priest, must be a Jesuit: he must visit the Vatican once a week at a fixed time, and he alone may absolve the Pope of his sins."

--http://amazingdisC 19eries.org/S-deception-The-New-Superior-General-A-Wolf-in-Sheeps-Clothing

Conclusion

Given the above historic facts about the Jesuits, it is incredulous and most shocking to see the media and the world's religious and political leaders stampeding to endorse and praise Pope Francis. We have no words to describe this unprecedented worldwide epidemic of memory loss towards Rome and her Jesuits.

The prescient warning of General Sherman is most appropriate to quote today:

"I would remind you of Webster's definition of a Jesuit: a designer, an intriguer. If the Church of Rome prevailed, the Pope would be the Universal King . . . The Jesuits are here to plot and scheme and, if possible, take from us the noble heritage of our civil and religious freedom. The rules of the Jesuit Order justify theft, licentiousness, lying, false witness bearing, suicide and the murder of parents and other relatives. The greatest crimes in history committed against individuals and nations have been committed by the Jesuits. Wherever Jesuits are they have the torch to burn, the sword to slay, the inquisition to torture. They are the enemies of Bible-believing Christianity. They live for conquest, fortune and glory."

--General Sherman's Son: The Life of Thomas Ewing Sherman, S.J., Joseph T. Durkin, S. J., (New York: Farrar, Straus and Cudahy, 1959) p. 186.

It is our duty to as followers of Yahuwah to expose Rome and her Jesuits, and to pray for the utter destruction of their evil deceit. Prayer is the only weapon we have against this veiled enemy we face today. Rome and her Jesuits are the greatest enemy of the Gospel and of humanity. However, we are assured in His prophetic Word that they will not prevail. The Harlot will be utterly destroyed prior to the Second Coming of Yahushua:

"And the ten horns which thou sawest upon the beast, these shall hate the whore, and shall make her desolate and naked, and shall eat her flesh, and burn her with fire." Revelation 17:16.

https://www.worldslastchance.com/end-time-prophecy/10-facts-you-must-know-about-the-jesuits.html

The Hegelian Dialectic Jesuit-Masonic Modus Operandi

All Jesuit, and subsequent high level (Illuminati level), Masonic activity is done using the agitation of opposites like Right and Left Wing, Communist versus Fascist, Liberal versus Conservative, Atheist versus Theist, etc...where Jesuit agenteurs create and remain aloof, behind all sides of conflicts in political, business, educational, military, media, and spiritual arenas through their controlled opposition agents.

Firstly, in creating duality, they foment chaos (e.g. social problems). After that, a reaction is launched by the target group. And then, a pre-ordained and pre-planned supposed "solution" is offered, which was the original goal, and primary and hidden objective of the dietetical ruse, all along. This strategy is known as “Order Out of Chaos” or, "Ordo ab Chao", the motto of the Jesuit Masonic 33 Degree level Illuminati.

The Veil of Democracy

The strength in this dialectical strategy is in its clandestine nature, where the net result culminates in an unaware populace happy and feeling empowered because its grievance was apparently was heard. This is The Veil of Democracy, while in fact they were conducted like cattle to follow a hidden agenda.

Rinse and Repeat

The Hegelian Dialectic is strategy repeated many, many times by The Jesuits until the desired aim is attained. It is a strategy whereby the ruling elite will continually create an artificial or synthetic problem, anticipating in advance the reaction of the population to the crisis, and thus conditioning the people to call for change. When the population is properly conditioned, the desired

agenda of the ruling elite is presented as the solution. The solution they present is not intended to solve the initial problem, but to serve as the basis for a new problem or exacerbate the existing one. When the newly created problem reaches the "boiling point", it becomes the foundation for the people to clamber for change again. This process is repeated over and over, all the time moving society towards whatever end point they have in mind (their agenda):

1. Problem (follow step 2)

2. Reaction (follow step 3

3. Solution (repeat step 1)

The Jesuit Application of Order Out of Chaos

"Order out of Chaos" is the creed of the Jesuit Vatican elite-ruling class; as it is a key stratagem used for social engineering to control the masses. A more technical term of this same principle is known as 'Hegelian Dialectics' – the clashing of opposed ideologies to achieve eventual compromise (thesis vs antithesis = synthesis).

Some common examples of 'Hegelian Dialectics' are:

1) Truth (thesis) -vs- Propaganda (antithesis) = Relativism (synthesis)
2) Republican -vs- Democrat = Neo-Progressivism
3) Capitalism -vs- Socialism = Corporatism
4) Protestantism -vs- Catholicism = Ecumenism

Notice each synthesis from the above examples: Relativism, Neo-Progressivism, Corporatism, Ecumenism; all are precise objectives on the menu for the power-elite.

A more diabolical version of this principle is quoted from Foundation of Human Understanding as follows:

1) The first step (thesis) is to create a problem.
2) The second step (antithesis) is to generate opposition to the problem (fear, panic and hysteria).
3) The third step (synthesis) is to offer the solution to the problem created by step one: A change which would have been impossible to impose upon the people without the proper psychological conditioning achieved in stages one and two."

Within this process, conflict and chaos are created at great cost of lives and resources to dismantle the social and political structures by which free societies govern themselves; ultimately to be replaced with centralized power and control of the people and resources.

Such a strategic agenda is the real cause of so many of the shootings, bombings, economic crises, wars, revolutions, etc, etc. It's time to wake up and recognize the strategies being used against us. This is a high call for keen discernment.

Ordo Ab Chao

'Hegelian Dialectics' is a key component of the Luciferian system, which is not just a religious system, but a political system; the Hegelian principle is summed-up in their creed "Ordo Ab Chao" (Order from Chaos).

Such methodology has been highly effective for the elite-ruling class (namely the high-ranking Jesuits, who leverage a whole host of different religious and political powers to gain greater dominance.

Order from chaos works like this: "Chaos", for one, distracts the population to "pay no attention to the man behind the curtain", and two,

causes the people to get so tired of the conflict that they are willing to compromise almost anything for some harmony.

That harmony then comes in the "Order" of those who (secretly) caused the problem- so they can implement their "solution" which is promoted to be in the best interest of the commonwealth of the people, but in actuality, is impoverishing and enslaving them.

Hegelian Dialectics is as old as politics but took on a whole new dimension to counter the Protestant Reformation through the military arm of The Jesuit Order. The Jesuits were recognized for causing so much chaos (revolutions, wars, assassinations) that they were expelled from almost every nation in Europe by the mid 1700's.

When making their comeback and complete takeover of the Vatican in the early 1800's, the Jesuits were prepared to be virtually undetectable as they mastered the arts of espionage and infiltration strategies; And as a result of their great success, most have no idea what the Jesuits are really about- how devious and diabolical they really are, as well as the vast amount of global temporal power they have secured.

And with such power and control, they easily have the means to rewrite history to C 19er their conspiracies, while painting a nicer picture of their image and track record.

Hegelian Dialectics Throughout History

As mentioned, this dialectic principle was brought to a whole new dimension by the Jesuit Order, who were commissioned by the Pope to combat the Protestant Reformation. Most people only recognize the mayhem of the Counter-Reformation and it's so-called "Holy Inquisition" as something that we are now hundreds of years removed from.

Jesuit Inquisition

However, the Counter-Reformation has gained more ground in this past century than ever before, as the Modern Inquisition has taken more lives than the previous centuries combined, since the ascension of Christ. This satanic

advancement was made possible by the C 19ert nature of their tactics and strategy. (Ultimately, it is only by God's permissive will, that this evil is allowed, for a time, for God's own triumphal purposes)

Most people know of the tens of millions of people mass murdered by Stalin, but a detail most folks are not aware of, is that most of those people were various kinds of Christians such as Orthodox & Protestants.

Most people know of the six million Jews that were killed under Hitler's Third Reich, but most are not aware of the 13 million Protestants who were annihilated, mostly from Northern Germany, who were fire-bombed, not by Hitler, but by the Allies, under the assumption and propaganda that states like Prussia were in cahoots with the SS.

Most people have no idea that these cruel dictators like Stalin, Hitler, Pavelic, Mussolini and many more were commissioned by the Catholic Hierarchy as modern-day Inquisitors of the ongoing Counter-Reformation. And what's even more difficult for Americans to see and accept is how the US has been leveraged for the same purposes.

WTC Attack: Hegelian Dialectics in Our Present Time

When understanding the stratagem of the Hegelian principle, you can then begin to recognize how it was implemented throughout history; And after recognizing this element in history, you can then recognize it in our present time. If you wish to cut through the lies and deception to see what the actual truth is, then it is of the essence to not only know the Truth of God's Word and Spirit, but to understand the workings of Satan's worldly system.

It's also very important to know that this satanic system has launched major disinformation campaigns as well as history revision campaigns, within this past century, to C 19er-up the true nature and magnitude of such atrocities. Many books, people and other sources that have documented the true accounts have been destroyed or suppressed and replaced with false versions of such accounts.

The sources below are a few that have survived such campaigns, and I encourage you to refer to these sources as part of your own research:

–Word & Spirit of God, Who Was and Is and Is to come

–Theodor Griesinger– historian, author 'The Jesuits: Their Complete History'

–John Clark Ridpath– historian, author 'Ridpath's Universal History'

–John Cornwall – journalist & author of 'Hitler's Pope'

–Samuel F. B. Morse– father of Morse Code, author of 'Foreign Conspiracy'

–Avro Manhattan– authority on Roman Catholicism in politics

–Emanuel M. Josephson– 'The "Federal" Reserve Conspiracy and Rockefellers'

–E. Boyd Barrett– Ex-Jesuit, author of 'The Jesuit Enigma'

–William Cooper– researcher, activist, author of 'Behold a Pale Horse'

–Eric Jon Phelps– historian, Jesuit expert & author of 'Vatican Assassins'

–Peter DeRosa– Catholic Priest, author 'Vicars of Christ: 'The Dark Side of The Papacy'

–Charles Spurgeon Archive– 19th century theologian and author

–Richard Bennet– Christian historian & former Catholic Priest

–William Tyndale– Protestant Reformer, theologian & translator

–Alberto Rivera– high ranking Jesuit Priest converted to true Christianity

–John Wcliffe– pre-Protestant Reformer, theologian & translator

–Augustus Toplady– 18th century theologian & author of 'The Road To Rome'

–John Foxe– historian & author of 'Foxes Book of Martyrs'

–Bill Mencarow– theologian & historian

–Kenneth Scott Latourette– historian, author of 'A History of Christianity'

–John Todd Collins– high ranking Illuminati member converted to Christianity

- -https://scottyonker.com/order-chaos/

The Khazarian Mafia Jesuits

Ignatius Loyola, the founder of The Society of Jesus or Jesuit Order, was a Crypto-Jew, (Crypto-Judaism is the secret adherence to Judaism while publicly professing to be of another faith; practitioners are referred to as "Crypto-Jews") but both Judaism and the Catholic Church are Babylonian and based upon Egyptian Kabbalistic Doctrine. Jesuits are not authentic Sephardic Jews. Rather, they are Talmudic and are of the Khazarian bloodline, pretending to be Jews in order to navigate undetected. Jesuits, Zionists, Communists, Fascists, Khazarian, NAZIs are all one and the same. The Jesuits are in absolute control of education and written history, even very recent history. The Jesuits are the same blood and people as the Khazars who have tricked the entire world into believing that they were the Jews persecuted in WW2

Chapter 2

The Flu World Order: Jon Rappoport Reveals All

The Numbers Game, The Fraud, And the Final Answer

When people---for example, medical researchers---are playing a game to further their purpose, and the game is a fraud, you have two ways to go.

You can ENTER THEIR GAME, temporarily, to show how, in their own terms, by their own standards, they are contradicting themselves and committing fraud.

Or you can STAND OUTSIDE THEIR GAME and show how the very structure and rules and assumptions of the game, to begin with, are riddled with lies.

In this article, I'll do both. And I'll make it clear when I'm INSIDE and when I'm OUTSIDE.

Why bother? Because it clarifies the mind. That's always a good thing. It's especially good during this wall-to-wall criminal event called C 19.

And readers deserve to know whether a writer is actually accepting the game the bad guys are playing; or whether he's just momentarily dipping into the game, in order to reveal its absurdities.

OK, here we go. Let's look at CASE NUMBERS.

Now, I'm inside their game. I'm assuming, as they do, that a case of C 19 is real. It means something. It denotes disease, infection, as a result of a virus. Ditto for a case of the flu, or what is called ILI, influenza-like illness. These cases are also real, they denote infection and illness as a result of a virus.

Start with Europe and just plain seasonal flu. Not C 19ID. According to the World Health Organization (WHO) Europe, "During the winter months, influenza may infect up to 20% of the population..."

The population of Europe is 741 million people. This works out to 148 million cases of ordinary flu. Not once. Every year. EVERY YEAR.

As of May 2, 2020, the number of C 19ID cases in Europe is 1,361,853, according to the European Centre for Disease Prevention and Control. Suppose we multiply that number by 2, or 4, or 20, to arrive a yearly figure for C 19ID cases in Europe. Does it approach, even vaguely, 148 million cases of flu---year after year after year?

According to the European Centre, the number of C 19ID cases in Italy is 209,328.

According to sciencedirect.com, "In the winter seasons from 2013/14 to 2016/17, an estimated average of 5,290,000 ILI [influenza-like illness] cases occurred in Italy, corresponding to an incidence of 9%." That's 5 million plus each year. Not just once.

Multiply the number of C 19ID cases in Italy by whatever number you choose and see what it takes to arrive at the flu-case level for a year. Year after year.

Finally, let's look at figures for ordinary flu, for the whole planet. A study published in the journal, Pharmacy and Therapeutics, states, "Influenza is a highly contagious respiratory illness that is responsible for significant morbidity and mortality. Approximately 9% of the world's population is affected annually, with up to 1 billion infections, 3 to 5 million severe cases, and 300,000 to 500,000 deaths each year."

However, WHO Europe pegs the death figure higher: "A recent study found that worldwide up to 650,000 people die of respiratory diseases linked to seasonal influenza each year..."

Right now, the C 19ID global death toll stands at 245,000. For roughly half a year. So, for 2020, C 19ID could approach the number of seasonal flu deaths. What about the next 10 or 20 years? Flu deaths are astronomically high every year.

All in all, on what basis---comparing seasonal flu and C 19ID---do we now have a C 19ID planetary lockdown, versus no lockdowns for seasonal flu at any time? It makes no sense.

Given the long-term track record of the flu, and the official response, meaning no lockdowns, it makes absolutely zero sense to have a lockdown now. The official numbers don't support it.

Given the game of official case numbers, and accepting those numbers---for example, one BILLION flu infections year after year---the refusal to administer widespread lockdowns for flu MEANS there should be no C 19ID lockdown now.

The numbers game traps and contradicts and implicates itself. It yields up: NO LOCKDOWN NOW.

But there IS a lockdown now.

All right. Let me step outside the numbers game. I'll take up a position far enough away to analyze its basis.

And I'll simply say: ALL C 19 case numbers are meaningless.

Why?

ONE:

Researchers never properly disC 19ered a new virus in China in the first place. Their claim of having done so is false.

TWO:

The widespread diagnostic test for the virus in a patient, the PCR, is riddled with irreparable flaws. It spits out false positives, because the test reacts to the presence of irrelevant germs that have nothing to do with a purported C 19ID. Most importantly the test has never been vetted, in the real world, for its claimed ability to detect whether a patient is ill or is going to become ill.

THREE:

Many diagnoses of C 19ID in patients are based on no tests at all, but rather eyeball assessment, guesswork, unproven assumptions, outright lying, or, in China, CT scans of the lungs, which prove nothing about the presence of C 19ID or any other supposedly causative virus.

To explore the particulars of my reasons ONE and TWO, you need to read my prior articles on the fake C 19ID pandemic. The link to my C 19ID articles is below. In particular, I suggest reading, "Two vital experiments that have never been done," for my refutation of both the disC 19ery of a new virus and the validity of the PCR test.

Therefore, again, ALL case numbers of C 19ID are meaningless.

Likewise, all seasonal flu or flu-like numbers are meaningless. As just one illustration of this fact, I have published, many times, Peter Doshi's shocking investigation of US flu deaths. Doshi reported in the online BMJ, on December 10, 2005, "...CDC claims 36,000 Americans annually die from flu...Meanwhile, according to the CDC's National Center for Health Statistics (NCHS), "influenza and pneumonia" took 62,034 lives in 2001---61 777 of which were attributed to pneumonia and 257 to flu, and in only 18 cases was flu virus positively identified..."

After both stepping outside the numbers game, and momentarily stepping into it, what are we left with? We know that people have been falling ill, for a long, long time, with respiratory problems of various kinds. The human race has survived, without a lockdown on the scale we have now, and without the deaths caused by economic devastation. If you wanted to enable general immunity (aka health), regardless of how you define and describe it, you

would now promote people being in close contact with one another. If you wanted to postpone immunity/health, you would lock people up and separate them.

As for the true causes of illness and disease, I have commented on that subject in other places. It's not the purpose of this article. I will say this: In modern times, we must never ignore poisonous vaccination campaigns; other toxic medical treatments, including many drugs; the insults delivered by pesticides, GMOs, industrial pollutants, and electromagnetic technologies; and the promotion of fear. Germ theory is not king. It never was.

--Jon Rappoport

Genetic Engineering Through Vaccines

We don't need Rahm Emanuel to tell us a crisis shouldn't go to waste. It's a strategy that probably got off the ground a hundred thousand years ago. The other half of it is, create the crisis to begin with. Then don't waste it.

Bill Gates plan involves a mother of all vaccines for C 19ID, mandated across the globe, before the lockdowns end. That's his psychopathic wet dream. Then, coming in behind that, his lackey, the World Health Organization, along with the professional liars at the CDC, will add---"we must mandate EVERY vaccine..."

To pull off a mandated global vaccine for eight billion people takes a manufactured crisis.

Fake virus plus real lockdown is the crisis.

You don't think that one up overnight. You plan. You drill, and you organize. You put all your ducks in a row. You prepare, in order to become Stalin and Mao.

Then somebody has to break the ice.

In this case, it was the Chinese regime---locking down 50 million people overnight in three cities. Moving quickly to a hundred million.

"If the Chinese did it, we can do it, too. We must."

Then follow up with a dire prediction. Where will that come from? "Let's dust off that broken-down hack, Neil Ferguson. He'll give us what we want. He always does. Tell him to slap together one of his computer models. You know, predictions of lots of deaths up the road. Half a million in the UK, a couple of million in the US. Fauci will salute it like money."

Then Lockdown

Drive people back into their homes. Put them out of work. Shut down businesses. Wreck economies.

NOW, hold out the carrot. The vaccine.

Note: A new C 19ID vaccine could be used to alter the genetic makeup of humans. That's exactly what the emerging (and as yet unlicensed) DNA technology does. It's a form of gene therapy, now in clinical trials---and, officially, one of the "competing candidates" for a C 19ID vaccine.

The New York Times, 3/10/15, "Protection Without a Vaccine." It describes a frontier of research. Here are key quotes that illustrate the use of synthetic genes to "protect against disease," while changing the genetic makeup of humans. This is not science fiction:

"By delivering synthetic genes into the muscles of the [experimental] monkeys, the scientists are essentially re-engineering the animals to resist disease."

"'The sky's the limit,' said Michael Farzan, an immunologist at Scripps and lead author of the new study."

"The first human trial based on this strategy - called immunoprophylaxis by gene transfer, or I.G.T. - is underway, and several new ones are planned." [That was five years ago.]

"I.G.T. is altogether different from traditional vaccination. It is instead a form of gene therapy. Scientists isolate the genes that produce powerful antibodies against certain diseases and then synthesize artificial versions. The genes are placed into viruses and injected into human tissue, usually muscle."

Here is the punchline: "The viruses invade human cells with their DNA payloads, and the synthetic gene is incorporated into the recipient's own DNA. If all goes well, the new genes instruct the cells to begin manufacturing powerful antibodies."

Read that again: "the synthetic gene is incorporated into the recipient's own DNA." Alteration of the human genetic makeup. Permanent alteration.

The Times article taps Dr. David Baltimore for an opinion:

"Still, Dr. Baltimore says that he envisions that some people might be leery of a vaccination strategy that means altering their own DNA, even if it prevents a potentially fatal disease.

Yes, some people might be leery. If they have two or three working brain cells.

Even if we (falsely) assume this is an epidemic caused by a virus, the official case numbers---as I've described in a recent article---do NOT warrant nearly as much concern as annual official flu numbers.

And, of course, NO lockdowns faintly resembling what we have now have ever been recommended, much less enforced, for flu.

And there is no mandated global flu vaccine.

Therefore, a planet-wide, mandated C 19ID vaccine, as a get-out-of-jail-card, is absurd.

The freedom to reject the vaccine MUST be protected.

The actual conspiracy theorists---Gates, WHO, CDC---who invented the conspiracy, must also be rejected. --Jon Rappoport

Professor Lockdown, Neil Ferguson, Resigns Over Sex Scandal

Neil Ferguson, the historically failed computer modeler, who threw darts at a board, and launched a prediction of 500,000 C 19ID deaths in the UK and two million in the US, and thereby convinced both governments to opt for extreme lockdowns, has resigned his UK government post.

No word yet whether his backer, Bill Gates, who pours tens of millions of dollars a year into Ferguson's institute at Imperial College, has turned off the money spigot.

Sex scandal: Ferguson admits he broke his own rules and the UK government's.

He saw his married girlfriend, Antonia Staats, during the lockdown; she traveled from her home to his, while he was still, technically, reC 19ering after a diagnosis of C 19ID. Staats says she and her husband have an open marriage. She says she suspects her husband has C 19ID.

Ferguson issued a statement of regret, a mea culpa, on his way out the door.

In his wake, he's left a distinct impression that: the privileged and rich live by a different set of rules, not subject to the constraints imposed on the masses; he can flout the lockdown edicts he helped create---therefore, how important can those edicts really be; the science behind lockdowns is not science at all; cheaters win, suckers lose.

If Trump, Boris Johnson, Merkel, Macron et al had a shred of sense, reason, smarts, and conscience, they would use this incident to attack

Ferguson's reputation and computer model and rip them to shreds. It's a perfect launch pad. But no. They drone on. They enable the armies of pod people wearing masks and staying home. They support that cosmically sociopathic Howdy Doody, Bill Gates.

The Guardian is bending over backwards by running a headline about headlines: "The prurient headlines about Neil Ferguson are a huge distraction."

Really? Does the author of the Guardian piece have a clue about Ferguson's track record in predicting epidemics? Does he know Ferguson claimed, in 2005, for example, that 200 million people could die in the bird flu "outbreak?" Official figures eventually listed the death toll in the low hundreds.

Does the author of the Guardian piece have a clue about the false-positive-spitting PCR diagnostic test for the virus? Is he aware that doctors and hospitals are putting "C 19" on death certificates of 90-year olds falling off buildings and testing positive on the way down?

Does he even faintly understand what is actually involved in claiming the disC 19ery of a new virus---and how a reliable procedure was never followed in Wuhan?

No, to all of the above. He's stuck railing about "prurient headlines."

Tsk, tsk, Neil Ferguson made a boo-boo.

Afraid not.

He set off a storm on nations and economies and people's lives.

His professional colleagues, who are still praising him as a genius, are C 19ering their own asses, because they know the career of making computer predictions is a fatuous con. They feast at a table of numbers, arranging them to suit their purposes.

To whom it may concern: when person A works for person B, and person B dumps money on person A's head, person A is going to do person B's bidding.

Person A is Ferguson. Person B is Bill Gates.

In what universe would Ferguson ever claim a virus, which is supposed to lead to a messianic Gates vaccine, is not dangerous at all? In no universe. That is called a conflict of interest.

No one firmly ensconced in the mainstream of medicine or science will say this out loud. No one in the mainstream will say, on this basis alone, Ferguson's models should be rejected.

Why?

Because they're cowards.

They should be wearing full hazmat suits pumping gas in Death Valley in the summer. Waiting for cars that never come.

--Jon Rappoport

C 19ID Breathing Ventilators Are Killing Patients

A recent study from the Journal of the American Medical Association Network delivers numbers that should make you stop and think---

JAMA Network, April 22, 2020, "Presenting Characteristics, Comorbidities, and Outcomes Among 5700 Patients Hospitalized With C 19 in the New York City Area":

"Mortality rates for those who received mechanical ventilation in the 18-to-65 and older-than-65 age groups were 76.4% and 97.2%, respectively. Mortality rates for those in the 18-to-65 and older-than-65 age groups who did not receive mechanical ventilation were 19.8% and 26.6%, respectively."

Well, of course, the people who were put on ventilators were the most ill patients to begin with, right? Perhaps. We don't know that.

In any case, the numbers are shocking.

How to explain them?

I offer several clues.

CLUE ONE:

A close and trusted researcher has told me the following: many older people live with chronically low oxygen levels. This may not be ideal, but they survive.

However, when such people arrive at hospitals, doctors can misinterpret the oxygen levels, believing these are dire emergency situations---and therefore, they put the patients on ventilators. With too much pressure, the result can be lung damage and death.

CLUE TWO:

The now-famous New York ER doctor, Cameron Kyle-Sidell, at Maimonides Medical Center, has stated that standard ventilator protocol could be damaging and killing patients.

NY Post, April 6: "In another video posted Sunday, Kyle-Sidell described C 19...It is as if tens of thousands of my fellow New Yorkers are on a plane at 30,000 feet and the cabin pressure is slowly being let out'," he said in a video posted Tuesday."

"'These patients are slowly being starved of oxygen ... and while they look like patients absolutely on the brink of death, they do not look like patients dying of pneumonia'."

Sidell has said the lung muscles of these patients are functioning. That is not the problem. Oxygen deprivation is the problem.

NY Post: "James Cai, a physician assistant who was New Jersey's first CV patient, told The Post that he agreed with Kyle-Sidell's observations and conclusions..."

"Cai noted that the... '[lung muscle in the] C 19 patient works just fine. So [a] ventilator is actually doing more harm to [the] lung...thousands of thousands [of] Americans' lives are on the line!'"

CLUE THREE:

Money. Insurance money. In a phone interview, physician and Minnesota state senator, Scott Jensen, told me that hospitals, who are suffering very deep financial losses, are incentivized by Medicare to label as many patients as possible "C 19," and to put them on ventilators.

Jensen stated that a patient on Medicare, diagnosed with straight pneumonia, would bring a $4600 payment to the hospital. The same patient, labeled "C 19 pneumonia," would bring $13,000. And if that patient is put on a ventilator: $39,000.

Result? Patients unnecessarily put on ventilators. With the wrong protocol, harm and death could result.

CLUE FOUR:

In New York, there are many elderly and very ill people, suffering from long-term conditions that have nothing to do with an epidemic. They have been treated for years with toxic drugs and toxic vaccines. They already have lung problems.

Massive propaganda about the C 19ID virus terrifies them. They believe they might be "infected." They're also afraid their neighbors might report them to the authorities if they cough at night. They come to hospitals. There, in the midst of a foreign environment, they're confused and even more scared. Diagnosed with C 19ID, put on ventilators, isolated from family and friends, they give up and die.

There is one more factor that has been overlooked. It involves the "high-altitude sickness" in patients. Oxygen deprivation. Some people have explained this as an effect of the recent rollout of 5G technology.

Here, from a CDC FAQ about 2003 SARS---yes, I said 2003---is a brief quote: "After 2 to 7 days, SARS patients may develop a dry, nonproductive cough that might be accompanied by or progress to a condition in which the oxygen levels in the blood are low (hypoxia)."

So unless the CDC is retrospectively rewriting history, straight oxygen deprivation (hypoxia) is not a recent development.

WebMD describes hypoxia: "Hypoxemia (low oxygen in your blood) can cause hypoxia (low oxygen in your tissues) when your blood doesn't carry enough oxygen to your tissues to meet your body's needs. The word hypoxia is sometimes used to describe both problems."

WebMD lists a number of causes: asthma attack; trauma (injury); COPD; emphysema; bronchitis; pain medicines, "and other drugs that hold back breathing"; heart problems; anemia, "a low number of red blood cells, which carry oxygen."

Among the drugs that can cause the oxygen deprivation known as hypoxia? From drugabuse.com: "...opiate [opioid] drugs also slow your breathing...and in case of an overdose, your breathing is slowed to a virtually non-existent and lethal level."

Is anyone looking into that, in New York?

More from drugabuse.com: "In the U.S., a whopping 44 people die each and every day as a result of respiratory arrest brought on by prescription opioid overdose. The opioids depress your breathing, bring on heavy sedation and make it impossible to wake up. What's more, the opioids found in painkillers are the same ones found in heroin, which caused over 8,000 overdose deaths in 2013."

From Medscape, there is more: "Life-threatening breathing difficulties can occur in patients who use gabapentin or pregabalin with opioids or other drugs that depress the central nervous system, as well as those with underlying respiratory impairment and the elderly, the US Food and Drug Administration (FDA) warned in a drug safety communication issued today."

2018 estimate of deaths from opioid overdoses in New York: 3000. Many more people in the New York area are addicted to these drugs. In New York State, in 2017, the number of people discharged from hospitals, after treatment for opioid overdose or dependency: 25,000.

In 2020, still more people who have developed opioid hypoxia would be missed, because they are diagnosed with "C 19 lung problems." Some of these people would be put on ventilators---ignoring the need to deal with their overdose, their addiction, their withdrawal---and they would die.

New York City, opioids, heroin, severe breathing problems, hypoxia.

None of the clues I've listed requires the existence or transmission of a purported CV.

Note: In the near future, I hope to publish updated information from the extraordinary environmental researcher, Jim West, who has been documenting the effects of pollution in the New York area for 20 years

--Jon Rappoport

The Chinese System Comes to America

The plan:

Use the "pandemic" as the rationale for "re-imagining" the guts of society---education, the workplace, medical care, transportation, public events, social relationships, the family...

Thus installing a new culture.

That desiccated dusty vampire, NY Governor Cuomo, and the cosmically psychopathic Howdy Doody, Bill Gates, are in the process of re-imagining education in NY State. Naturally, it's all about more computers, and remote learning.

I guess the dinosaur called BOOKS won't work, because there's no glowing screen, and the ability to read is a prerequisite.

In other news, the Chinese social credit system is coming to corporate America. (The Wall St. Journal has a relevant podcast, "Welcome Back to the Office, Your Every Move Will Be Watched.")

Huge companies are scrambling to put together packages to sell to other huge companies:

Social distancing in offices, automatically monitored in real time; a caste system for employees based on health indicators; a credit score for each worker at the end of the day showing up on his cell phone; wall-to-wall surveillance...

Not just for now. For the new "re-imagined" America after the lockdowns are relaxed.

Unconstitutional, you say? Yes, there will be legal cases. This is called at-will employment. A corporation tells an employee: "You don't want to submit to an antibody test? Or a vaccine? You don't want to carry your cell around with you at work, so we can accomplish minute-to-minute contact tracing? You don't want to wear a wrist band that measures social distancing? Fine. We understand. This is a free country. But you can't work here anymore..."

How could this happen?

1) Who was one of the richest men in the world, oved the Mao Revolution in China?
2) Who wrote about it glowingly, in the NY Times: "Whatever the price of the Chinese Revolution [30-60 million killed by their own government], it has obviously succeeded not only in producing more efficient and dedicated administration, but also in fostering high morale and community of purpose. The social experiment in China under Chairman Mao's leadership is one of the most important and successful in human history." ("From a China Traveler", The New York Times, August 10, 1973.)

3) Who sent his agent, the president of the United States, Richard Nixon, to China, a year earlier, to open up trade after 25 years of diplomatic isolation?
4) Whose family had staged a revolution in medicine in the early 20th century, ultimately forcing a pharmaceutical paradigm down the throats of billions of people?
5) Who extended the germ theory of disease to the point at which populations would be hypnotized by it?
6) Who knew that medical tyranny and dictatorship were the roads to travel, in order to gain control of nations and bring in a new world order?

DAVID ROCKEFELLER, that's Who!

His beloved Chinese system of slavery comes to America.

Speaking of re-imagining, here is a backgrounder I wrote four years ago. It lays out the operation known as the Trilateral Commission, created by David Rockefeller.

Its goal? A collectivist world run as a corporate entity. What better excuse for its necessity than a global "pandemic?" Top-down governance of the planet, in order to detect the earliest signs of disease outbreaks anywhere...

Backgrounder: The secret circle that controls governments

Who is in charge of destroying separate nations?

One group has been virtually forgotten. Its influence is enormous. It has existed since 1973.

It's called the Trilateral Commission (TC).

Keep in mind that the original stated goal of the TC was to create "a new international economic order."

In the run-up to his inauguration after the 2008 presidential election, Barack Obama was tutored by the co-founder of the Trilateral Commission, Zbigniew Brzezinski.

In 1969, four years before birthing the TC with David Rockefeller, Zbigniew Brzezinski wrote: "[The] nation state as a fundamental unit of man's organized life has ceased to be the principal creative force. International banks and multinational corporations are acting and planning in terms that are far in advance of the political concepts of the nation state."

Goodbye, separate nations.

Any doubt on the question of TC goals is answered by David Rockefeller himself, in his Memoirs (2003): "Some even believe we are part of a secret cabal working against the best interests of the United States, characterizing my family and me as 'internationalists' and of conspiring with others around the world to build a more integrated global political and economic structure---one world, if you will. If that is the charge, I stand guilty, and I am proud of it."

Patrick Wood, author of ***Trilaterals Over Washington***, points out there are only 87 members of the Trilateral Commission who live in America. Obama appointed eleven of them to posts in his administration:

*** Tim Geithner, Treasury Secretary**

*** James Jones, National Security Advisor**

*** Paul Volker, Chairman, Economic ReC 19ery Committee**

*** Dennis Blair, Director of National Intelligence**

Here is a stunning piece of forgotten history, a 1978 conversation between a US reporter and two members of the Trilateral Commission. (Source: Trilateralism: The Trilateral Commission and Elite Planning for World Management; ed. by Holly Sklar, 1980, South End Press, Pages 192-3).

The conversation was public knowledge at the time.

Anyone who was anyone in Washington politics, in media, in think-tanks, had access to it. Understood its meaning.

But no one shouted from the rooftops. No one used the conversation to force a scandal. No one protested loudly.

The conversation revealed that the entire basis of the US Constitution had been torpedoed, that the people who were running US national policy were agents of an elite shadow group. No question about it.

And yet: official silence. Media silence. The Dept. of Justice made no moves, Congress undertook no serious inquiries, and the President, Jimmy Carter, issued no statements. Carter was himself an agent of the Trilateral Commission in the White House. He had been plucked from obscurity by David Rockefeller, and through elite TC press connections, vaulted into the spotlight as a pre-eminent choice for the Presidency.

The following 1978 conversation featured reporter, Jeremiah Novak, and two Trilateral Commission members, Karl Kaiser and Richard Cooper. The interview took up the issue of who exactly, during President Carter's administration, was formulating US economic and political policy.

The careless and off-hand attitude of Trilateralists Kaiser and Cooper is astonishing. It's as if they're saying, "What we're revealing is already out in the open, it's too late to do anything about it, why are you so worked up, we've already won..."

NOVAK (the reporter): Is it true that a private [Trilateral committee] led by Henry Owen of the US and made up of [Trilateral] representatives of the US, UK, West Germany, Japan, France and the EEC is coordinating the economic and political policies of the Trilateral countries [which would include the US]?

COOPER: Yes, they have met three times.

NOVAK: Yet, in your recent paper you state that this committee should remain informal because to formalize 'this function might well prove offensive

to some of the Trilateral and other countries which do not take part.' Who are you afraid of?

KAISER: Many countries in Europe would resent the dominant role that West Germany plays at these [Trilateral] meetings.

COOPER: Many people still live in a world of separate nations, and they would resent such coordination [of policy].

NOVAK: But this [Trilateral] committee is essential to your whole policy. How can you keep it a secret or fail to try to get popular support [for its decisions on how nations will conduct their economic and political policies]?

COOPER: Well, I guess it's the press' job to publicize it.

NOVAK: Yes, but why doesn't President Carter come out with it and tell the American people that [US] economic and political power is being coordinated by a [Trilateral] committee made up of Henry Owen and six others? After all, if [US] policy is being made on a multinational level, the people should know.

COOPER: President Carter and Secretary of State Vance have constantly alluded to this in their speeches. [a lie]

KAISER: It just hasn't become an issue.

This interview slipped under the mainstream media radar, which is to say, it was buried.

US (and other nations') economic and political policy run by a committee of the Trilateral Commission---the Commission created in 1973 by David Rockefeller and his sidekick, Zbigniew Brzezinski.

When Carter won the presidential election (1976), his aide, Hamilton Jordan, said, if after the inauguration, Cy Vance and Brzezinski came on board as secretary of state and national security adviser, "We've lost. And I'll quit." Lost---because both men were powerful members of the Trilateral Commission and their appointment to key positions would signal a surrender of White House control to the Commission.

Vance and Brzezinski were appointed secretary of state and national security adviser, as Jordan feared. But he didn't quit. He became Carter's chief of staff.

Now consider the vast propaganda efforts of the past 40 years, on so many levels, to install the idea that all nations and peoples of the world are a single Collective.

From a very high level of political and economic power, this propaganda op has had the objective of grooming the population for a planet that is one coagulated mass, run and managed by one force. A central engine of that force is the Trilateral Commission.

…One planet, with national borders erased, under one management system, with a planned global economy, "to restore stability," "for the good of all."

And one day in the future, a student would ask his teacher, "What happened to the United States?" And the teacher would say, "It was a criminal enterprise based on individual freedom. Fortunately, our leaders rescued the people and taught them the superior nature of HARMONY AND COOPERATION."

--Jon Rappoport

Bill Gates, HR 6666, Remdesivir, and Deaths in Italy

Each of these subjects deserves its own article. Bill Gates would require a library of thick volumes. I don't have the time to write separate pieces, since I'm also busy with other research on the fake pandemic.

So I'll hit the highlights.

Bill Gates:

Here, from FAIR, the long-standing media-watch group, is a September 4, 2016, article, "This Guardian piece touting Bill Gates' education investment brought to you by Bill Gates." It adds a layer of explanation about Gates' Death Star:

"The Gates Foundation gives grants in the hundreds of thousands and often millions to such media organizations as NBCUniversal, Al Jazeera, BBC, Viacom (CBS) and Participant Media (the producer of pro-charter school documentary Waiting for Superman). Both Gates and the Gates Foundation are sizable shareholders in Comcast, which is the primary investor in Buzzfeed and Vox, as well the parent corporation of MSNBC and NBC News---the latter of which teamed up with Gates and other noted education experts like Exxon and University of Phoenix Online for the week-long charter school commercial 'Education Week'."

"In 2009, the New York Times reported that the Gates Foundation was partnering with media companies to write and shape stories to 'embed' messages in primetime dramas:"

"'It [the Gates Foundation] is less well known as a behind-the-scenes influencer of public attitudes toward these issues by helping to shape story lines and insert messages into popular entertainment like the television shows ER, Law & Order: SVU and Private Practice. The foundation's messages on HIV prevention, surgical safety AND THE SPREAD OF INFECTIOUS DISEASES have found their way into these shows." [CAPS are mine]

"His enormous wealth and the reach of media parent corporations seem to exempt Gates from routine disclosure requirements. He was offered up as an education expert in the pro-charter Waiting for Superman, without any mention of the fact that he donated at least $2 million to the film and had a media partnership with its distributor, Viacom. He is given softball interviews in Comcast-backed Vox without disclosure that he's a major Comcast investor. Because his stake in media companies is laundered enough times, it's assumed not to merit mention."

"In the case of the Guardian, Gates effectively owns an entire vertical, so when one of his investments is written up, one doesn't notice the conflict of interest---like a fish doesn't notice water. Because his influence is everywhere, it appears to be nowhere."

HR6666: This aptly numbered bill is moving forward in the US House Energy and Commerce Committee. Titled TRACE, "Testing, Reaching, And Contacting Everyone," it officially embeds the snitch culture---with benefits for new agents of the State:

"To authorize the Secretary of Health and Human Services to award grants to eligible entities to conduct diagnostic testing for C 19, and related activities such as contact tracing, through mobile health units and, as necessary, at individuals' residences, and for other purposes."

"The Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention, may award grants to eligible entities to conduct diagnostic testing for C 19, to trace and monitor the contacts of infected individuals, and to support the quarantine of such contacts..."

HR6666 funds this enterprise to the tune of "$100,000,000,000 for fiscal year 2020; and such sums as may be necessary for each of fiscal year 2021 and any subsequent fiscal year during which the emergency period continues."

Why don't they simply advertise: "Have you always wanted to run around like a little fascist, targeting the unwary, the sheep, the outliers, the rebels, the dissenters? Here's your chance. The State will pay you to do it. Who knows? Maybe the government will design a uniform for you, embroidered with the logo of a skull or a virus with spikes."

Remdesivir:

This is the Fauci C 19ID drug. He wants the antiviral to hit the market yesterday. At the Alliance for Human Research and Protection (ahrp.org), an article points to the fraud:

"Fauci's Promotional Hype Catapults Gilead's Remdesivir": "On 4/29, Gilead, the manufacturer of Remdesivir, issued a press release announcing that it 'was aware of positive data emerging from a National Institute of Allergy and Infectious Disease (NIAID) study'." Gilead provided assistance on study design and conduct to NIAID.

"Based on the 'positive data' from the NIAID study, the Food and Drug Administration approved emergency use of Remdesivir against C 19 on May 1."

"...Dr. Anthony Fauci, who heads the President's CV Task Force, and heads the NIAID, since 1984, has a vested interest in Remdesivir. He sponsored the NIAID clinical trial whose detailed results have not been peer-reviewed. What's more, on May 1, HE declared the tenuous results to be 'highly significant,' and pronounced Remdesivir to be the new 'standard of care.'"

"Dr. Fauci made the promotional pronouncement while sitting on a couch in the White House, without providing a detailed news release; without a briefing at a medical meeting or in a scientific journal - as is the norm and practice, to allow scientists and researchers to review the data."

"What Dr. Fauci failed to disclose to the public in his promotional pronouncement was that the [list of] primary outcomes [measures for success or failure] of the [NAID] study [NCT04280705] were changed on April 16, 2020. Changes in the Primary Outcome are posted on Clinical Trials.gov."

"Changing primary outcomes [measures] after a study has commenced is considered dubious and suspicious."

"Reuters News reported that highly respected prominent leaders in the medical community - such as Steven Nissen, MD, the chief academic officer at the Cleveland Clinic and Eric Topol, MD, director and founder of the Scripps Research Translational Institute in California - were unimpressed by Remdesivir's tentative, modest benefit at best."

"...the NIAID-Gilead study results have not been published in peer-reviewed literature - nor have details of the findings been disclosed. However, they were

publicly promoted by the head of the federal agency that conducted the study, from the White House. What better free advertisement?"

So...take this admittedly toxic drug. Convincing data? No need. Just trust Fauci. Like other drugs of its type, Remdesivir inhibits the machinery of cell-reproduction in the body.

Deaths in Italy:

I have reported on this con in the past. Italy's own National Institute of Health has been combing through the records of patients who have died. Their average age? 79.5. And the overwhelming percentage of these people were already suffering from multiple, long-term, serious health conditions---and had certainly been treated with a number of toxic medical drugs. Claiming their deaths stemmed from the purported C 19 virus would be absurd.

Add to these facts the horrendous air pollution in areas of Northern Italy. Toxic air can easily explain the lung conditions attributed to the virus.

In recent years, the annual number of flu cases in Italy averages roughly five million. It's a simple matter to label some of these people C 19.

I've also indicated that vaccination campaigns could account for destruction of health in Northern Italy. I have a few possible clues in that regard.

Colorado Naturopathic Doctor, Michael Murray writes: "Could a new flu vaccine be partly responsible for the C 19 mortality rate in Italy? My colleague, Dr. Alex Vazquez, provided me with a valuable insight. In September 2019, Italy rolled out an entirely new type of influenza vaccine. This vaccine called VIQCC is different than others. Most available influenza vaccines are produced in embryonated chicken eggs. VIQCC, however, is produced from cultured animal cells rather than eggs and has more of a 'boost' to the immune system as a result. VIQCC also contains four types of viruses - 2 type A viruses (H1N1 and H3N2) and 2 type B viruses..."

Well-known Italian writer, Br. Alexis Bugnolo, states: "Italians are still trying to understand why Bergamo, of all the cities of Italy, is the epicenter of the CV epidemic..."

"One factor may be that the city was vaccinated en mass not once, but twice, in the 2 months preceding the CV outbreak in the city."

In the fall [2019], according to records 141,000 doses of vaccine against the winter flu were administered by the local health board. Of those, 129,000 were Italians over 65 years of age. Of those, 129,000, 70% had grave heart problems."

"Then, again, in December, from the 24th through to January, there was a mass vaccination program against Hepatitis-C of 21,331 citizens of Bergamo. And in the surrounding province, another 12,000 citizens."

At doctorsinitaly.com: "In September 2019 was made available for the first time in Italy a 'cell-based' flu shot, called VIQCC or QIVc, that is produced from cultured animal cells rather than eggs."

"VIQCC is a quadrivalent flu vaccine that contains 2 type A viruses (H1N1 and H3N2) and 2 type B viruses. It is approved for people ages 9 and older."

ANY vaccines given to people whose immune systems are already weakened---such as the elderly and infirm---are automatically dangerous and life-threatening at a high level. Two vaccines within the space of a few months, one of which has added new viral material and/or a variety of new cellular and genetic debris---plus the usual toxic chemicals---and you have a potential recipe for disaster. --Jon Rappoport

Jon Rappoport Comments on David Crowe's Assessment of C 19 Virus

Canadian author and independent researcher, David Crowe, has spent several decades analyzing and torpedoing SPECIFICS of conventional medical research. At the deepest level.

I'm talking about, for example, the mainstream claims of disC 19ering new viruses.

Crowe does not lay on vague brushstrokes. He goes to the core of fabrications and exposes them, chapter, and verse.

His new paper, which he continues to update and expand, is: "Flaws in CV Pandemic Theory."

Here I quote from the section of his paper where he takes up the question of disC 19ery---have researchers actually found a new virus which they assert is the cause of a new pandemic, C 19?

At the end of this article, I list the published papers Crowe refers to by number, as he takes apart the very basis of the C 19ID illusion.

David Crowe:

"Scientists are detecting novel RNA in multiple patients with pneumonia-like conditions, and are assuming that the detection of RNA (which is believed to be wrapped in proteins to form an RNA virus, as CVes are believed to be) is equivalent to isolation of the virus. It is not, and one of the groups of scientists was honest enough to admit this":

"'We did not perform tests for detecting infectious virus in blood.'"

"But, despite this admission, earlier in the paper they repeatedly referred to the 41 cases (out of 59 similar cases) that tested positive for this RNA as, '41 patients...confirmed to be infected with 2019-nC 19'."

Another paper quietly admitted that:

"'Our study does not fulfill Koch's postulates.'"

"Koch's postulates, first stated by the great German bacteriologist Robert Koch in the late 1800s, can simply be stated as":

- **Purify the pathogen (e.g. virus) from many cases with a particular**
- **illness.**
- **Expose susceptible animals (obviously not humans) to the pathogen.**
- **Verify that the same illness is produced.**
- **Some add that you should also re-purify the pathogen, just to be sure that it really is creating the illness."**

"Famous virologist Thomas Rivers stated in a 1936 speech, 'It is obvious that Koch's postulates have not been satisfied in viral diseases'. That was a long time ago, but the same problem still continues. None of the papers referenced in this article have even attempted to purify the virus. And the word 'isolation' has been so debased by virologists it means nothing (e.g. adding impure materials to a cell culture and seeing cell death is 'isolation')."

" Zhu N et al. did publish electron [microscope] micrographs, but it can clearly be seen in the lesser magnified photo, that the particles believed to be CV are not purified as the quantity of material that is cellular is much greater. The paper notes that the photos are from 'human airway epithelial cells'. Also consider that the photo included in the article will certainly be the 'best' photo, i.e. the one with the greatest number of particles. Lab technicians may be encouraged to spend hours to look around to find the most photogenic image, the one that most looks like pure virus."

"There is no way to tell that the RNA being used in the new CV PCR test is found in those particles seen under the electron micrograph. There is no connection between the test, and the particles, and no proof that the particles are viral."

"A similar situation was revealed in March 1997 concerning HIV, when two papers published in the same issue of the journal 'Virology' revealed that the vast majority of what had previously been called 'pure HIV' was impurities that were clearly not HIV, and the mixture also included macrovesicles that look very similar to HIV under an electron microscope, but are of cellular origin.".

In a half-sane world, David Crowe's analysis would provoke an open honest discussion and debate among all sorts of scientists and researchers, and the repressed truth would tumble out and be confirmed.

Of course, we do not live in that world.

Instead, we have mistaken-prone researchers and outright liars welcomed into the hallowed pages of medical journals. They are enabled by editors who look the other way.

The consequences, of course, are not merely academic.

A planet can be placed on lockdown.

Do I really need to say this at this late date---without the disC 19ery of an actual disease-causing virus, the whole "pandemic" falls apart. The whole "spreading virus" assertion falls apart. But instead, the whole world is believing Bill Gates, who did not even graduate from college, has zero Virology training, zero medical background, and billions of dollars invested in Vaccines and human tracking devices. See the problem here?

--Jon Rappoport

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***Canadian author and independent researcher, David Crowe, has spent several decades analyzing and torpedoing SPECIFICS of conventional medical research.**

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Forgotten Moments from The Lethal History of Vaccines

Scientific propaganda about vaccines has reached dizzying heights, as officials point the uninformed public toward the Day of Liberation, when a C 19ID shot, otherwise known as God, will rescue Earth.

Here, from a chapter in my 1988 book, AIDS INC., is an excerpt exposing some of the infamous moments in vaccination history---hidden by the press, or simply forgotten.

For those denialists who cling to the notion that vaccines are remarkably safe and effective, this article is a pill you can swallow, bitter to be sure, but immunizing against the effects of bald lies from the bent medical establishment.

Understand: this is only a partial history of disasters and revelations, and it stops at 1988.

1) "The combined death rate from scarlet fever, diphtheria, whooping cough and measles among children up to fifteen shows that nearly 90 percent of the total decline in mortality between 1860 and 1965 had

occurred before the introduction of antibiotics and widespread immunization. In part, this recession may be attributed to improved housing and to a decrease in the virulence of micro-organisms, but by far the most important factor was a higher host-resistance due to better nutrition." Ivan Illich, Medical Nemesis, Bantam Books, 1977

2) "In a recent British outbreak of whooping cough, for example, even fully immunized children contracted the disease in fairly large numbers; and the rates of serious complications and death were reduced only slightly. In another recent outbreak of pertussis, 46 of the 85 fully immunized children studied eventually contracted the disease."
3) "In 1977, 34 new cases of measles were reported on the campus of UCLA, in a population that was supposedly 91% immune, according to careful serological testing. Another 20 cases of measles were reported in the Pecos, New Mexico, area within a period of a few months in 1981, and 75% of them had been fully immunized, some of them quite recently. A survey of sixth-graders in a well-immunized urban community revealed that about 15% of this age group are still susceptible to rubella, a figure essentially identical with that of the pre-vaccine era."
4) "Finally, although the overall incidence of typical acute measles in the U.S. has dropped sharply from about 400,000 cases annually in the early 1960s to about 30,000 cases by 1974-76, the death rate remained exactly the same; and, with the peak incidence now occurring in adolescents and young adults, the risk of pneumonia and demonstrable liver abnormalities has actually increased substantially, according to one recent study, to well over 3% and 2%, respectively." Richard Moskowitz, MD, The Case Against Immunizations, 1983, American Institute of Homeopathy.
5) "Of all reported whooping cough cases between 1979 and 1984 in children over 7 months of age - that is, old enough to have received the primary course of the DPT shots (diphtheria, pertussis, tetanus) - 41% occurred in children who had received three or more shots and 22% in children who had one or two immunizations."

6) "Among children under 7 months of age who had whooping cough, 34% had been immunized between one and three times..."

7) "... Based on the only U.S. findings on adverse DPT reactions, an FDA-financed study at the University of California, Los Angeles, one out of every 350 children will have a convulsion; one in 180 children will experience high-pitched screaming [can indicate brain damage]; and one in 66 will have a fever of 105 degrees or more." Jennifer Hyman, Democrat and Chronicle, Rochester, New York, special supplement on DPT, dated April 1987.
8) "A study undertaken in 1979 at the University of California, Los Angeles, under the sponsorship of the Food and Drug Administration, and which has been confirmed by other studies, indicates that in the U.S.A. approximately 1,000 infants die annually as a direct result of DPT vaccinations, and these are classified as SIDS (Sudden Infant Death Syndrome) deaths. These represent about 10 to 15% of the total number of SIDS deaths occurring annually in the U.S.A. (between 8,000 and 10,000 depending on which statistics are used)." Leon Chaitow, Vaccination and Immunization, CW Daniel Company Limited, Saffron Walden, Essex, England, 1987.
9) "Assistant Secretary of Health Edward Brandt, Jr., MD, testifying before the U.S. Senate Committee on Labor and Human Resources, rounded... figures off to 9,000 cases of convulsions, 9,000 cases of collapse, and 17,000 cases of high-pitched screaming for a total of 35,000 acute neurological reactions occurring within forty-eight hours of a DPT shot among America's children every year." DPT: A Shot in the Dark, by Harris L. Coulter and Barbara Loe Fischer, Harcourt Brace Jovanovich.
10) "While 70-80% of British children were immunized against pertussis in 1970-71, the rate is now 39%. The committee predicts that the next pertussis epidemic will probably turn out to be more severe than the one in 1974/75. However, they do not explain why, in 1970/71, there were

more than 33,000 cases of pertussis with 41 fatal cases among the very well immunized British child population; whereas in 1974/75, with a declining rate of vaccination, a pertussis epidemic caused only 25,000 cases with 25 fatalities." Wolfgang Ehrengut, Lancet, Feb. 18, 1978, p. 370.

11) "... Barker and Pichichero, in a prospective study of 1232 children in Denver, Colorado, found after DTP that only 7% of those vaccinated were free from untoward reactions, which included pyrexia (53%), acute behavioral changes (82%), prolonged screaming (13%), and listlessness, anorexia and vomiting. 71% of those receiving second injections of DTP experienced two or more of the reactions monitored." Lancet, May 28, 1983, p. 1217

12) "Publications by the World Health Organization show that diphtheria is steadily declining in most European countries, including those in which there has been no immunization. The decline began long before vaccination was developed. There is certainly no guarantee that vaccination will protect a child against the disease; in fact, over 30,000 cases of diphtheria have been recorded in the United Kingdom in fully immunized children." Leon Chaitow, Vaccination and Immunization, p. 58.

13) "Pertussis (whooping cough) immunization is controversial, as the side effects have received a great deal of publicity. The counter claim is that the effectiveness and protection offered by the procedure far outweigh the possible ill effects... annual deaths, per million children, from this disease over the period from 1900 to the mid-nineteen seventies, shows that from a high point of just under 900 deaths per million children (under age 15) in 1905, the decline has been consistent and dramatic. There had been a lowering of mortality rates of approximately 80% by the time immunization was introduced on a mass scale, in the mid-nineteen fifties. The decline has continued, albeit at a slower rate, ever since. No credit can be given to vaccination for the major part of the decline since it was not in use." Chaitow, Vaccination and Immunization, p. 63.

14) "... the swine-flu vaccination program was one of its (CDC) greatest blunders. It all began in 1976 when CDC scientists saw that a virus involved in a flu attack outbreak at Fort Dix, N.J., was similar to the swine-flu virus that killed 500,000 Americans in 1918. Health officials immediately launched a 100-million-dollar program to immunize every American. But the expected epidemic never materialized, and the vaccine led to partial paralysis in 532 people. There were 32 deaths." U.S. News and World Report, Joseph Carey, October 14, 1985, p. 70, "How Medical Sleuths Track Killer Diseases."
15) "Despite (cases) in which (smallpox) vaccination plainly failed to protect the population, and despite the rampant side-effects of the methods, the proponents of vaccination continued their attempts to justify the methods by claims that the disease had declined in Europe as a whole during the period of its compulsory use. If the decline could be correlated with the use of the vaccination, then all else could be set aside, and the advantage between its current low incidence could be shown to outweigh the periodic failures of the method, and to favour the continued use of vaccination. However, the credit for the decline in the incidence of smallpox could not be given to vaccination. The fact is that its incidence declined in all parts of Europe, whether or not vaccination was employed." Chaitow, Vaccination and Immunization, pp. 6-7.
16) "Smallpox, like typhus, has been dying out (in England) since 1780. Vaccination in this country has largely fallen into disuse since people began to realize how its value was discredited by the great smallpox epidemic of 1871-2 (which occurred after extensive vaccination)." W. Scott Webb, A Century of Vaccination, Swan Sonnenschein, 1898.
17) "In this incident (Kyoto, Japan, 1948) - the most serious of its kind - a toxic batch of alum-precipitated toxoid (APT) was responsible for illness in over 600 infants and for no fewer than 68 deaths."
18) "On 20 and 22 October 1948, a large number of babies and children in the city of Kyoto received their first injection of APT. On the 4th and 5th of November, 15,561 babies and children aged some months to 13 years received their second dose. One to two days later, 606 of those

who had been injected fell ill. Of these, 9 died of acute diphtheritic paralysis in seven to fourteen days, and 59 of late paralysis mainly in four to seven weeks." Sir Graham Wilson, Hazards of Immunization, Athone Press, University of London, 1967.

19) "Accidents may, however, follow the use of this so-called killed (rabies) vaccine owing to inadequate processing. A very serious occurrence of this sort occurred at Fortaleza, Ceara, Brazil, in 1960. No fewer than 18 out of 66 persons vaccinated with Fermi's carbolized (rabies) vaccine suffered from encephalomyelitis and every one of the eighteen died." Sir Graham Wilson, Hazards of Immunization.
20) "At a press conference in Washington on 24 July, 1942, the Secretary of War reported that 28,585 cases of jaundice had been observed in the (American) Army between 1 January and 4 July after yellow fever vaccination, and of these 62 proved fatal." Wilson, Hazards of Immunization.
21) "The world's biggest trial (conducted in south India) to assess the value of BCG tuberculosis vaccine has made the startling revelation that the vaccine 'does not give any protection against bacillary forms of tuberculosis.' The study said to be 'most exhaustive and meticulous,' was launched in 1968 by the Indian Council of Medical Research (ICMR) with assistance from the World Health Organization (WHO) and the U.S. Centers for Disease Control in Atlanta, Georgia."
22) "The incidence of new cases among the BCG vaccinated group was slightly (but statistically insignificantly) higher than in the control group, a finding that led to the conclusion that BCG's protective effect 'was zero.'" New Scientist, November 15, 1979, as quoted by Hans Ruesch in Naked Empress, Civis Publishers, Switzerland, 1982.
23) "Between 10 December 1929 and 30 April 1930, 251 of 412 infants born in Lubeck received three doses of BCG vaccine by the mouth during the first ten days of life. Of these 251, 72 died of tuberculosis, most of them in two to five months and all but one before the end of the first year. In addition, 135 suffered from clinical tuberculosis but eventually reC 19ered; and 44 became tuberculin-positive but remained well. None of

the 161 unvaccinated infants born at the time was affected in this way and none of these died of tuberculosis within the following three years." Hazards of Immunization, Wilson.

24) "We conducted a randomized double-blind placebo-controlled trial to test the efficacy of the 14-valent pneumococcal capsular polysaccharide vaccine in 2295 high-risk patients... Seventy-one episodes of proved or probable pneumococcal pneumonia or bronchitis occurred among 63 of the patients (27 placebo recipients and 36 vaccine recipients)... We were unable to demonstrate any efficacy of the pneumococcal vaccine in preventing pneumonia or bronchitis in this population." New England Journal of Medicine, November 20, 1986, p. 1318, Michael Simberkoff et al.
25) "But already before Salk developed his vaccine, polio had been constantly regressing; the 39 cases out of every 100,000 inhabitants registered in 1942 had gradually diminished from year to year until they were reduced to only 15 cases in 1952... according to M. Beddow Baylay, the English surgeon and medical historian." Slaughter of the Innocent, Hans Reusch, Civitas Publish ers, Switzerland, and Swain, New York, 1983.
26) "Many published stories and reports have stated, implied and otherwise led professional people and the public to believe that the sharp reduction of cases (and of deaths) from poliomyelitis in 1955 as compared to 1954 is attributable to the Salk vaccine...That it is a misconception follows from these considerations. The number of children inoculated has been too small to account for the decrease. The sharp decrease was apparent before the inoculations began or could take effect and was of the same order as the decrease following the immediate post-inoculation period." Dr. Herbert Ratner, Child and Family, vol. 20, no. 1, 1987.
27) "So far it is hardly possible to gain insight into the extent of the immunization catastrophe of 1955 in the United States. It may be considered certain that the officially ascertained 200 cases (of polio) which were caused directly or indirectly by the (polio) vaccination constitute minimum figures... It can hardly be estimated how many of

the 1359 (polio) cases among vaccinated persons must be regarded as failures of the vaccine and how many of them were infected by the vaccine. A careful study of the epidemiologic course of polio in the United States yields indications of grave significance. In numerous states of the U.S.A., typical early epidemics developed with the immunizations in the spring of 1955...The vaccination incidents of the year 1955 cannot be exclusively traced back to the failure of one manufacturing firm." Dr. Herbert Ratner, Child, and Family, 1980, vol. 19, no. 4, "Story of the Salk Vaccine (Part 2)."

28) "Suffice it to say that most of the large (polio) epidemics that have occurred in this country since the introduction of the Salk vaccine have followed the wide-scale use of the vaccine and have been characterized by an uncommon early seasonal onset. To name a few, there is the Massachusetts epidemic of 1955; the Chicago epidemic of 1956; and the Des Moines epidemic of 1959." Dr. Herbert Ratner, Child, and Family, 1980 vol. 19, no. 4.

29) "The live (Sabin) poliovirus vaccine has been the predominant cause of domestically arising cases of paralytic poliomyelitis in the United States since 1972. To avoid the occurrence of such cases, it would be necessary to discontinue the routine use of live poliovirus vaccine." Jonas Salk, Science, March 4, 1977, p. 845.

30) "By the (U.S.) government's own admission, there has been a 41% failure rate in persons who were previously vaccinated against the (measles) virus." Dr. Anthony Morris, John Chriss, BG Young, "Occurrence of Measles in Previously Vaccinated Individuals," 1979; presented at a meeting of the American Society for Microbiology at Fort Detrick, Maryland, April 27, 1979.

31) "Prior to the time doctors began giving rubella vaccinations, an estimated 85% of adults were naturally immune to the disease (for life). Because of immunization, the vast majority of women never acquire natural immunity (or lifetime protection)." Dr. Robert Mendelsohn, Let's Live, December 1983, as quoted by Carolyn Reuben in the LA WEEKLY, June 28, 1985.

32) "Administration of KMV (killed measles vaccine) apparently set in motion an aberrant immunologic response that not only failed to protect children against natural measles but resulted in heightened susceptibility." JAMA Aug. 22, 1980, vol. 244, p. 804, Vincent Fulginiti and Ray Helfer. The authors indicate that such falsely protected children can come down with "an often severe, atypical form of measles. Atypical measles is characterized by fever, headache... and a diverse rash (which)... may consist of a mixture of macules, papules, vesicles, and pustules... "

The above quotes reflect only a mere fraction of an available literature.

It is criminally deceiving to say, "Vaccines are simple; they stimulate the immune system and confer immunity against specific germ agents."

Official reports on vaccine reactions are often at odds with unofficial estimates because of the method of analysis used. If adverse vaccine-reaction is defined as a small set of possible effects experienced within 72 hours of an inoculation, then figures will be smaller. But doctors like G.T. Stewart, of the University of Glasgow, have found through meticulous investigation, including visits to hospitals and interviews with parents of children vaccinated, that reactions as severe as brain-damage (e.g., from the DPT vaccine) can be overlooked, go unreported and can be assumed to have come from other causes.

Well, that was my finding, in 1988, when I looked beneath the surface of the vaccine question.

Now we are in very deep waters. C 19 hysteria has been tuned up to the NEED for a vaccine.

WE need to slough off this promoted bad dream and stand firm against the little gods who traffic their vials in every doctor's office, hospital, school, drug store, and tented parking lot---making them into shooting galleries.

We already have natural immune systems. They work.

--Jon Rappoport

Television Wartime Messaging: For the Love of Unity

In today's episode of C 19ID fakery on rye and hold the apocalypse, we begin with a bevy of quotes from Edward Bernays (1891-1995), the acknowledged father of modern public relations, aka propaganda. I include his statements as a warm-up backgrounder---

"This is an age of mass production. In the mass production of materials a broad technique has been developed and applied to their distribution. In this age, too, there must be a technique for the mass distribution of ideas." (1928)

"The engineering of consent is the very essence of the democratic process, the freedom to persuade and suggest." (1947)

"It is sometimes possible to change the attitudes of millions but impossible to change the attitude of one man." (date unknown)

"When I came back to the United States, I decided that if you could use propaganda for war, you could certainly use it for peace. And 'propaganda' got to be a bad word because of the Germans using it, so what I did was to try and find some other words. So we found the words 'counsel on public relations'." (date unknown)

"Domination to-day is not a product of armies or navies or wealth or policies. It is a domination based on the one hand upon accomplished unity, and on the other hand upon the fact that opposition is generally characterized by a high degree of disunity." (1923)

"The public relations counsel, therefore, is a creator of news for whatever medium he chooses to transmit ideas. It is his duty to create news no matter what the medium which broadcasts this news." (1923)

"The only difference between 'propaganda' and 'education,' really, is in the point of view. The advocacy of what we believe in is education. The advocacy of what we don't believe in is propaganda." (1923)

"The conscious and intelligent manipulation of the organized habits and opinions of the masses is an important element in democratic society. Those who manipulate this unseen mechanism of society constitute an invisible government which is the true ruling power of our country. We are governed, our minds are molded, our tastes formed, our ideas suggested, largely by men we have never heard of. This is a logical result of the way in which our democratic society is organized. Vast numbers of human beings must cooperate in this manner if they are to live together as a smoothly functioning society." (1928)

"Propaganda is the executive arm of the invisible government." (1928)

"If you can influence the leaders, either with or without their conscious cooperation, you automatically influence the group which they sway. But men do not need to be actually gathered together in a public meeting or in a street riot, to be subject to the influences of mass psychology. Because man is by nature gregarious, he feels himself to be member of a herd, even when he is alone in his room with the curtains drawn. His mind retains the patterns which have been stamped on it by the group influences." (1928)

The news heads and the talk show heads and the sports heads and the advertisers and bureaucrats and politicians and public health flacks and celebrities are assuring television viewers, with no shame: We're all in this together. Over and over. Night and day. On every channel.

This was the strategy during older wars. No time for disagreement or dissent; there must be a unified response and effort; otherwise, we could lose.

We're all in this together means: fall in line.

If that's share and care and love, it's robot love.

Advertisers, despite their studies and their sophistication and their wall-to-wall profiling of consumers, still believe in the first principle of propaganda: repetition.

Get the name of your product and company out there and don't stop. Do it a thousand times, a million times. As long as you have money to pay for ads, do it.

Look at the insurance company commercials. Progressive, State Farm, Liberty, Geico. The little vignettes they lay on are really the occasion for pasting their company name on the screen. Make these 30-second stories friendly and funny and crazy, but the money shot is the company name.

Pandemic ads and messages follow the same rule. In this case, it's TOGETHERNESS. UNITY. Pounded on and on.

> Why? If cooperation and love and togetherness are basic human impulses, why do people need to be reminded of that 24 hours a day, on television?

Does a husband who loves his wife need to see his face and his wife's face on a screen, on every channel, without let-up, along with a message urging him to adore her?

On the other hand, a person who's been thrown out of a job, who can't find work, who sees his government checks fading down to zero...he needs pacification. That's a tough sell. That sell-job requires a whole lot of repetition...

...In order to produce SHAME in him, if he feels cheated and exiled and screwed. The repetition of togetherness and fake love informs him that the collective citizenry isn't on his side. It tells him his righteous anger has no place in the relentlessly upbeat messaging of "unity." It keeps him feeling isolated.

Now we're getting down to it. Don't let the people who are economically devastated believe they can find each other. Shut them out. Pump them full of television public service ads that paint an "uplifting" picture from which they're excluded.

They may be devastated, but television tells them they aren't on the team if they give their own concerns first priority. If they do, they're non-persons.

After all, when they sit at home watching TV, do they see a cropped video of another unemployed worker sitting in a dark room saying, "THIS IS CRAZY. I WANT TO WORK. I NEED FOOD. MY BOSS CLOSED HIS COMPANY. HE'S BANKRUPT. WHAT THE HELL IS GOING ON?"

Are they offered that kind of unity? Togetherness?

"Hi. I'm an NFL cornerback. I've made thirty million during my career. Here I am at home with my kids. We're playing games on the floor. I'm enjoying my family. We'll get through this. All of us. Stay safe. Use the time to bring your family closer together."

Major news outlets are under strict orders to keep "disturbing human-interest stories" off the front page and away from their broadcasts. This is also part and parcel of the wartime effort.

It would have to be, since economic devastation is what this fake pandemic is actually all about. No one in the mainstream will let that cat out of the bag. It would be more than a mistake. It would be a confession. It would be suicide.

How about these headlines? VACCINE KINGS WANT TO SOFTEN UP POPULATIONS FOR A NEEDLE IN THE ARM. A RUINED POPULACE IS READY TO BE LED INTO A NEW WORLD ORDER.

Propagandists know that a one-two punch of fear and then assurance works. Scare them with the virus, comfort them with togetherness.

But still, it's a tough sell. It has legs for a while, but then the natives become restless, especially in the hinterlands. People who aren't jammed together in big cities, who live in open spaces, tend to develop immunity to lies. Coiffed press hookers on television dispensing so-called news carry less punch. Farmers know if they can't plant their crops on time, with workers side by side, they'll go broke.

Generally speaking, people who don't see other people who are sick, and don't hear ambulance sirens, start wondering what's happening.

Protests begin. Protests expand.

The fake night of obedience turns into the real day of rebellion.

It turns out that a story about an invisible virus isn't quite the same as a line of enemy tanks approaching. All promoted wars are not equal.

Fauci knows this. Birx knows this. Bill Gates knows this. Mayors and governors know this. The CDC and WHO know this. They don't really care whether you survive, but they know you care. So, for them, it's a race against time. How long can they keep the lid on? How long can their preposterous messaging work?

Stage magic is an odd game. The performer has to run his tricks quickly, so people don't have the luxury of sitting back and thinking about how he is fooling them. However, the public health magicians and the politician magicians and the news magicians are hemmed in---they're basically one-trick ponies. Virus, virus, virus=together, together, together.

It looks good, but it wears out.

It's wearing out now.

I'll close this piece with a few more gems from Edward Bernays---to urge you to keep your eye on the ball. The real ball.

"If we understand the mechanism and motives of the group mind, is it now possible to control and regiment the masses according to our will without their knowing it?" (1928)

"A single factory, potentially capable of supplying a whole continent with its particular product, cannot afford to wait until the public asks for its product; it must maintain constant touch, through advertising and propaganda, with the vast public in order to assure itself the continuous demand which alone will make its costly plant profitable. This entails a vastly more complex system of distribution than formerly." (1928)

"No serious sociologist any longer believes that the voice of the people expresses any divine or especially wise and lofty idea. The voice of the people expresses the mind of the people, and that mind is made up for it by the group leaders in whom it believes and by those persons who understand the manipulation of public opinion. It is composed of inherited prejudices and symbols and clichés and verbal formulas supplied to them by the leaders." (1928)

"Propaganda is of no use to the politician unless he has something to say which the public, consciously or unconsciously, wants to hear." (1928) --Jon Rappoport

Who Pushes the Idea of An Epidemic? What Are Their Crimes?

"It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as an editor of The New England Journal of Medicine." ---Marcia Angell, MD ("Drug Companies and Doctors: A story of Corruption." NY Review of Books, Jan. 15, 2009.)

With my C 19erage of the so-called pandemic, we are seeing many new readers showing up and paying attention. So I want to expose a few facts about the modern medical system---facts I've presented many times over the past 10 years.

I do this because of a little thing called REPUTATION. If the track record of major medical officials were really understood, people would ignore their current pronouncements with barely a glance. Pronouncements like: THE VIRUS IS SPREADING; THIS IS A MAJOR EPIDEMIC; WE'RE TESTING A NEW PROTECTIVE VACCINE AND EVERYONE MUST TAKE IT.

I also expose facts because MEDICALLY CAUSED DEATH is routinely swept under the carpet by the mainstream press. Actually, as a result of media silence, the subject of medical harm is where the subject of grossly poisoned food was in the 19th and early 20th centuries. At that time, giant food processors had created their own Wild West, where they could sell lethal poison (eat, fall down dead) hidden in products. The press helped expose these crimes and transfix the public, which led to partial reforms. Now, in the medical arena, the press is a partner in capital crimes.

Major medical officials have been sitting on a time bomb. The range of medical maiming and killing is astonishing.

Imagine a Congressional hearing held before media cameras, with reporters all over the world ready with shocking facts about one of the leading causes of death:

SENATOR: Sir, I have the mainstream medical death numbers in front of me. How can you keep this secret from the public?

FDA COMMISSIONER: It's not a secret, sir. Many experts know about it.

SENATOR: I'm looking through the trillion-dollar federal budget. I'm looking for the money allocated to fix this horrible situation. Where are those funds?

FDA COMMISSIONER: Nowhere. Don't blame us.

SENATOR: Why not?

FDA COMMISSIONER: Because we can never be dismantled. We're eternal. God created the FDA. God created the CDC.

I know major media won't investigate medically caused death numbers, because I've published reports for years, and I've contacted news people with the facts; and nothing happens.

So we begin with a few citations.

July 26, 2000, Journal of the American Medical Association; author, Dr. Barbara Starfield, revered public health expert at the Johns Hopkins School of Public Health; "Is US health really the best in the world?"

Starfield reported that the US medical system kills 225,000 Americans a year. 106,000 as a result of FDA-approved medical drugs, and 119,000 as a result of mistreatment and errors in hospitals. Extrapolate the numbers to a decade: that's 2.25 million deaths. You might want to read that last number again.

I interviewed Starfield in 2009. I asked her whether she was aware of any overall effort by the US government to eliminate this holocaust, and whether she had ever been contacted by any government agency to consult on such an effort. She answered a resounding NO to both questions. She also said her estimate of medically caused deaths in America was on the conservative side.

Here is another citation: BMJ June 7, 2012 (BMJ 2012:344:e3989). Author, Jeanne Lenzer. Lenzer refers to a report by the Institute for Safe Medication Practices: "It [the Institute] calculated that in 2011 prescription drugs were associated with two to four million people in the US experiencing 'serious, disabling, or fatal injuries, including 128,000 deaths.'"

The report called this "one of the most significant perils to humans resulting from human activity."

The report was compiled by outside researchers who went into the FDA's own database of "serious adverse [medical-drug] events."

Therefore, to say the FDA isn't aware of this finding would be absurd. The FDA knows. The FDA knows and it isn't saying anything about it, because the FDA certifies, as safe and effective, all the medical drugs that are routinely maiming and killing Americans. Every public health agency knows the truth.

Here is another citation: The article is, "The Epidemic of Sickness and Death from Prescription Drugs." The author is Donald Light, who teaches at Rowan University, and was the 2013 recipient of ASA's [American Sociological

Association's] Distinguished Career Award for the Practice of Sociology. Light is a founding fellow of the Center for Bioethics at the University of Pennsylvania. In 2013, he was a fellow at the Edmond J. Safra Center for Ethics at Harvard. He is a Lokey Visiting Professor at Stanford University.

Donald Light: "Epidemiologically, appropriately prescribed, prescription drugs are the fourth leading cause of death, tied with stroke at about 2,460 deaths each week in the United States. About 330,000 patients die each year from prescription drugs in the United States and Europe. They [the drugs] cause an epidemic of about 20 times more hospitalizations [6.6 million annually], as well as falls, road accidents, and [annually] about 80 million medically minor problems such as pains, discomforts, and dysfunctions that hobble productivity or the ability to care for others. Deaths and adverse effects from overmedication, errors, and self-medication would increase these figures." (ASA publication, "Footnotes," November 2014)

Another study, published in the Journal of the American Medical Association on April 15, 1998: "Incidence of Adverse Drug Reactions in Hospitalized Patients." It, too, is mind-boggling.

The authors, led by Jason Lazarou, culled 39 previous studies on patients in hospitals. These patients, who received drugs in hospitals, or were admitted to hospitals because they were suffering from the drugs doctors had given them, met the following fate:

Every year, in the US, between 76,000 and 137,000 hospitalized patients die as a direct result of the drugs.

Beyond that, every year 2.2 million hospitalized patients experience serious adverse reactions to the drugs.

The authors write: "...Our study on ADRs [Adverse Drug Reactions], which excludes medication errors, had a different objective: to show that there are a large number of ADRs even when the drugs are properly prescribed and administered."

So this study had nothing to do with doctor errors, nurse errors, or improper combining of drugs. And it only counted people killed who were admitted to hospitals. It didn't begin to tally all the people taking pharmaceuticals who died as consequence of the drugs, without being admitted to hospitals. (Note: none of the studies and reviews I'm citing in this article include damage and death as a result of vaccines.)

The statistics I'm quoting reveal a human problem on the level of a tsunami sweeping across the whole of America and Europe.

Why won't major media outlets report these facts and pound on their significance?

The obvious reason: their big-spending pharmaceutical advertisers would drop them like hot potatoes.

But there are other reasons.

Every medical bureaucrat or medical shill or medical expert who jumps aboard the media train, to assure the public that drugs and vaccines are remarkably safe, is sitting on the time bomb I have described above.

If this bomb were widely recognized, who would continue to believe these professional pundits? Who would accept anything they say? How could they possibly sustain their credibility?

"Well, the system I represent kills 2.25 million people per decade and maims between 20 and 40 million more people per decade, but I want to assure you this vaccine presents no problems at all. It's incredibly safe."

Every single pronouncement, on any subject, issued via the medical cartel's Ministry of Truth (major media), would fall on disbelieving ears, and only increase general outrage.

Mainstream reporters and editors and publishers are well aware that telling the truth would undermine a basic institution of society.

The media are there to give credibility to society and its structures. That's why they're called "major" instead of "minor."

When hard rains fall, the media are there with an umbrella to hold over organized society's head. To walk away in the middle of a downpour would leave the status quo unprotected.

"Defending the Crown" is another way to put it. The King may make mistakes, he may commit heinous offenses, but he is the King, and therefore his position must remain secure.

Young journalists learn this point quickly. If in their zeal, they cross the threshold and attempt to expose a central myth, fairy tale, legend, they're put back in their place. They absorb the message. Journalism has limits. Certain truths are silent truths.

Over the years, I've talked to reporters who are solidly addicted to obfuscations. Like any addict, they have an army of excuses to rationalize their behavior.

The medical experts are worse. Their pretense of idealism knows no limits and is matched only by their fatuous claim to bullet-proof knowledge.

When you peel the veneer away, they are enablers, persons of interest, co-conspirators.

There is nothing quite like a high-minded, socially positioned, card-carrying member of the King's circle of protectors. The arrogance is titanic. Because what is being hidden is so explosive.

It is the duty of the Crown to make his subjects feel safe and protected and even loved.

No wonder he needs such a large army of trained helpers in and around the press.

He has them.

But their monopoly is breaking down.

We're in a new breakout level of truth. It's called independent media.

So...on the subject of epidemics, when public health officials, and their government enablers, and the compliant press, and doctors tell us that a new virus is sweeping the world, a vaccine will stop it, and we must take that vaccine...why should anyone fall in line and accept their words?

Professional liars, professional criminals may pretend they are spouting science, but they are merely relying on the ignorance of the public.

It may interest you to know that the US system of reporting severe adverse effects of vaccines is broken. There are no reliable numbers.

Barbara Loe Fisher, of the private National Vaccine Information Center, has put together a reasonable estimate:

"But how many children have [adverse] vaccine reactions every year? Is it really only one in 110,000 or one in a million who are left permanently disabled after vaccination? Former FDA Commissioner David Kessler observed in 1993 that less than 1 percent of doctors report adverse events following prescription drug use. [See DA Kessler, 'Introducing MEDWatch,' JAMA, June 2, 1993: 2765-2768]"

"There have been estimates that perhaps less than 5 or 10 percent of doctors report hospitalizations, injuries, deaths, or other serious health problems following vaccination. The 1986 Vaccine Injury Act contained no legal sanctions for not reporting; doctors can refuse to report and suffer no consequences."

"Even so, each year about 12,000 reports are made to the Vaccine Adverse Event Reporting System [VAERS]; parents as well as doctors can make those reports. [See RT Chen, B. Hibbs, 'Vaccine safety,' Pediatric Annals, July 1998: 445-458]"

"However, if that number represents only 10 percent of what is actually occurring, then the actual number may be 120,000 vaccine-adverse events [per year]. If doctors report vaccine reactions as infrequently as Dr. Kessler said they report prescription-drug reactions, and the number 12,000 is only 1

percent of the actual total, then the real number may be 1.2 million vaccine-adverse events annually."

Medical illiteracy in the population---the public health experts and the pharmaceutical titans feast on it. It allows them to get away with mass murder every day.

For those who think murder is too strong a word, I'll close with this: it's simple---when you're in a profession that keeps killing and maiming people at a tragic and astonishing rate, and you know it and do nothing about it, you're guilty. Period. No amount of evasion or excuse changes the fact.

THESE are the people telling you to believe their story about a pandemic. THESE are the people claiming the village has to be blasted in order to save it.

--Jon Rappoport

The CV Vaccine as A Source of Dangerous Invasion

This article is based on the research of Annie Logical. Her far-reaching, many-branched piece, "CV Fakery and The Link To 5G Testing," can be found at vigiliae.org.

In prior pieces (see here and here), I documented two of the experimental technologies that may be unleashed on the public, in the rush to develop a CV vaccine.

DNA vaccines inject synthesized genes. The recipient's genetic makeup is altered PERMANENTLY in unknown ways. RNA vaccines carry the potential to trigger autoimmune reactions: the body attacks aspects of itself.

As if that weren't enough, there is another element deployed in DNA vaccines. It's called electroporation.

An online dictionary provides a definition: "the action or process of introducing DNA or chromosomes into bacteria or other cells [including human cells] using a pulse of electricity to briefly open the pores in the cell membranes."

A pioneer in this field is Dr. David Weiner. He is the co-founder of a San Diego company, Inovio Pharmaceuticals.

NBC San Diego, January 25, 2020: "A San Diego biotech company just received a $9 million grant to develop a vaccine for the CV. Inovio Pharmaceuticals received a grant from the Coalition for Epidemic Preparedness Innovations (CEPI)."

If Inovio wins a license to sell their version of a DNA CV vaccine, electroporation will undoubtedly be brought along as part of the technology.

Here is an excerpt from an article, "What you always needed to know about electroporation DNA vaccines," published in the journal, Human Vaccines and Immunotherapeutic, November 1, 2012: "…the cell membrane also needs to be in a permeabilized ["opened"] state in order to allow passage of the DNA molecule…[Electric] Pulses may be optimized to achieve either a greater degree of permeability of the cell membrane (for passive diffusion of drugs), or a greater degree of electrophoretic effect. As mentioned below, there are various ways to go about this, but generally a series of short high voltage pulses (e.g., 8 pulses of 0.1 ms at 1,000 V/cm voltage to electrode distance) is used for drug delivery, and a combination involving long low voltage pulses is used for DNA transfer [into human cells] (e.g., 1 pulse of 0.1 ms, 800 V/cm and 1 long pulse of 400 ms 80 V/cm).

In a nutshell, this means that human cells, whose membranes are "too tight" to allow DNA to be injected into them, will be "opened up" by electric pulses, in order to deliver the new type of vaccine

Apparently, it doesn't occur to the researchers that human cells may be as "tight" as they are for a reason; and forcing them open with electric pulses, in order to inject DNA, could have unforeseen effects.

Electroporation isn't the same kind of invasive action as, say, cutting into flesh to remove a bullet, during emergency surgery. The DNA vaccines, along with electric pulses, would be given to healthy people.

But as long as we think of ourselves as guinea pigs, willing to sit still for all sorts of medical experiments, what difference does it make? Genetic-altering vaccines, the body attacking itself, electroporation—if we surrender to the experts, and their assurances, I'm sure everything will be all right.

Right?

"Here's what we're doing. It's quite innovative. You see, with electric pulses, we briefly open up cells and inject DNA, synthesized genetic material, into them. Ordinarily, the cells would reject such an intrusion, but we get around that. Once the genetic material is inside cells, it mimics a virus, and the immune system responds, as if this were an actual viral disease. That's the vaccine effect. It's wonderful. Safe. Nothing dangerous could happen…"

--Jon Rappoport

Chapter 3

The 5G EMF Network: C 19: Radiation Sickness Connection

The Corona Electric Discharge Caused "Virus" and Respiratory Health

Electromagnetic radiation seems to be everywhere now, effecting the Earth's Ozone layer, and subsequently, generating toxic gasses such as Ozone (O3), Nitric Oxide (NO), and in turn, Nitrogen Dioxide (NO2), and thus Nitric Acid (HNO3). This Technocratic term, "Corona", in the context of the current CV circus show may simply be code for **Radiation Sickness**. Hence, the "Corona" Virus strain that we are relentlessly hearing about, may be, in actuality, referencing **Corona Electric Discharge,** which may be responsible for triggering excessive virus manufacturing by the human immune system.

In other words, it appears some significant increase in Electromagnetic Radiation in the environment, on a world scale, is causing the human immune system to generate a remarkable number of viruses to clear out huge excesses of waste and toxins in the intercellular region of the human body. And, the thing to remember is that it is not an external contagious virus that is causing the sickness. Rather, the viruses are an immune response to a deeper causal threat, and that cause seems to be Electromagnetic Radiation poisoning.

A Review of Viruses

A virus is your own body's response to radiation, toxins, and poison. There are no killer viruses lurking out there to attack you. It is a complete misunderstanding of basic epidemiology and immunology to view viruses as a threat. It would be like calling water a threat when it is used to carry away toxins from your liver. Similarly, viruses clean your body at the cellular level. They do not highjack cells nor do they highjack enzymes to access cells. They actually bud FROM cells. Cells produce protein C 19ered RNA and DNA "viruses" to clean up intercellular waste.

The REAL threats are external environmental insults to the human body and immune system, which cause the cells to manufacture Exosomes (known as viruses) to cleanse the body of such intercellular poisonous waste. A virus is not something you catch. They are actually an Exosomotic secretion that your body creates to flush out and fight off toxins. In effect, Exosomes are excretory nano-vesicles that are formed by the cell's endocytic system and shed from the surface of almost all types of cells. These tiny extracellular vesicles, thought to be "garbage bags for cells," carry a wide variety of molecules of cellular origin, including proteins, lipids, and RNAs, that are selectively incorporated during the formation of exosomes.

A "virus" is something that is formed inside the body under certain immuno-stress conditions to fight certain 'ill' 'affected' cells. Viruses are NOT alive. They are exempt of things essential for life. They contain no nucleus and no other part of a living cell organism. They are not going to attack you via an airborne Kamikaze attack. A virus is a collection of genetic material (DNA or RNA) inside a protein shell and are rendered impotent and as soon as they hit the air, with no way to enter your body unless they are intravenously injected into your blood. The body just creates more viruses to fight off x, y, z. Again, viruses are merely Exosomes to clean up bacterial wastes in the intercellular region of your immune system to protect the cells.

Now, what we are seeing is that people are allegedly arriving at hospitals with 'symptoms' of CV which actually looks like cellular poisoning, radiation

pneumonitis damage, oxygen deprivation, Hypoxia, Thrombosis (blood clotting), and stroke, none of which are related to CV.

However, these symptoms are related to human exposure to toxic gasses and radiation poisoning.

Following the Electric Corona Discharge Hypothesis

A Corona discharge is an electrical discharge brought on by the ionization of a fluid such as air surrounding a conductor that is electrically charged. Spontaneous corona discharges occur naturally in high-voltage systems unless care is taken to limit the electric field strength. A corona will occur when the strength of the electric field (potential gradient) around a conductor is high enough to form a conductive region, but not high enough to cause electrical breakdown or arcing to nearby objects. It is often seen as a bluish glow in the air adjacent to pointed metal conductors carrying high voltages and emits light by the same property as a gas discharge lamp.

In many high voltage applications, corona is an unwanted side effect. Corona discharge from high voltage electric power transmission lines constitutes an economically significant waste of energy for utilities. In high voltage equipment like cathode ray tube televisions, radio transmitters, X-ray machines, and particle accelerators, the current leakage caused by coronas can constitute an unwanted load on the circuit. In the air, coronas generate gases such as Ozone (O3), Nitric Oxide (NO), and in turn, Nitrogen Dioxide (NO2), and thus Nitric Acid (HNO3), if water vapor is present. These gases are corrosive and can degrade and embrittle nearby materials and are also toxic to humans and the environment. –Wikipedia

Ozone (O3)

When inhaled, Ozone (O3) can damage the lungs. Relatively low amounts can cause chest pain, coughing, shortness of breath and throat irritation. Ozone may also worsen chronic respiratory diseases such as asthma and compromise the ability of the body to fight respiratory infections

What is NO2 and how does it get in the air?

Nitrogen Dioxide (NO2) is one of a group of highly reactive gases known as oxides of nitrogen or nitrogen oxides (NOx). Other nitrogen oxides include nitrous acid and nitric acid. NO2 is used as the indicator for the larger group of nitrogen oxides. NO2 primarily gets in the air from the burning of fuel. NO2 forms from emissions from cars, trucks and buses, power plants, and off-road equipment.

Health Effects of NO2

Breathing air with a high concentration of NO2 can irritate airways in the human respiratory system. Such exposures over short periods can aggravate respiratory diseases, particularly asthma, leading to respiratory symptoms (such as coughing, wheezing or difficulty breathing), hospital admissions and visits to emergency rooms. Longer exposures to elevated concentrations of NO2 may contribute to the development of asthma and potentially increase susceptibility to respiratory infections. People with asthma, as well as children and the elderly are generally at greater risk for the health effects of NO2.

NO2 along with other NOx reacts with other chemicals in the air to form both particulate matter and ozone. Both of these are also harmful when inhaled due to effects on the respiratory system.

And so, we may conclude that this Pandemic is simply the result of a massive increase in Electromagnetic radiation, and subsequent toxic gasses in the air, worldwide, which is, in turn, causing the human immune system to over manufacture viruses, internally, to clear out excessive choke points of toxic waste caused by this radiation increase. 5G, of course, would fit the description of the culprit, to the letter.

5G EMF and pShuttle-SN Sequences Proving C 19 Laboratory Origin

There is good reason to believe that bioweapon engineering was involved in creating C 19, in spite of detractors claiming otherwise. The CV

"bioweapon" might have been a Chinese vaccine experiment gone wrong, or it might have intentionally been released, who knows. Nevertheless, it exhibits genetic engineering characteristics. Its genes contain **"pShuttle-SN"** sequences, proving laboratory origin.

Recently, a paper published in the Biorxiv.org journal presented findings that indicated the CV appeared to be engineered with "key structural proteins" of HIV. The paper, entitled, "Uncanny similarity of unique inserts in the 2019-nC 19 spike protein to HIV-1/ It was concluded that the engineering of CV with such gene sequences was "unlikely to be fortuitous in nature," providing strong scientific support for the theory that the CV is an engineered bioweapon that escaped laboratory containment in China.

As detailed by James Lyons-Weiler, PhD, founder of the Institute for Pure and Applied Knowledge and author of 57 peer-reviewed publications, an analysis of the gene sequence for the CV finds a peculiar sequence called "pShuttle-SN." This sequence is the remnant of a genetic engineering sequence that's used to insert genes into viruses and bacteria. It provides irrefutable "open source" proof that the CV now circulating in the wild was engineered in a laboratory. Every lab that has the gene sequence can see this for themselves. It's right out in the open, which is why we describe this revelation as "open source." This sequence has a 92% match with the Spike protein from the SARS CV.

What we may in fact be looking at is a hidden attempt by the Chinese to get a jump on this, the economics of vaccines, but they were failing, and that's why the last time there was a SARS vaccine, the vaccine developers could not get funding because the trial mice, the rats were dying. It's not just a rogue CV that just happened to acquire this SARS element. It's a laboratory spliced virus. It has escaped from the laboratory or people have been vaccinated with it and that's why it's in their bodies.

If it's an escaped vaccine strain that has now gone wild, the entire world is now vulnerable to the SARS-CV gene insertion which was previously found to be killing lab animals, which is why the SARS vaccine program was halted (because it was too dangerous to test on humans).

There is a huge difference in the predicted health outcome for the world if this is a vaccination experiment in China versus just a laboratory escaped virus. In the vaccination experiment, you're not vaccinated against CV with that vaccine, so if the Chinese tried to get a jump on the vaccine market by surreptitiously running clinical trials against the CV, and made their elderly and immunocompromised more susceptible to death due to subsequent infection by ANY CV with this protein that's in the vaccine, then the rest of the world has a serious problem. In other words, this C 19 supercharges the common flu and adds a protein spike that locks onto 5G EMF to literally break down the body's natural immunity response to the average CV Flu. Further, cell phones actually give a sizable dose of EMF radiation, and so just a normal cell phone may be activating the protein splice in C 19.

My hypothesis is that C 19 is spliced with a gene protein in such a way that it possesses a unique programmable protein characteristic that remains dormant unless activated by intense 5G EMF radiation. There are microtubules connected to the DNA at the axion. These microtubules are electromagnetically driven. The C 19OD 19 protein splice helps to facilitate an electromagnetic conductivity that the 5G network can easily exploit to create cell damage and respiratory failure as the EMF radiation robs the body of oxygen as it attempts to pass through the water and oxygen rich environment of the human body. In other words, the C 19 virus, when activated by 5G EMF radiation, literally suffocates the body. The pneumonia damaged lungs that the normal CV may incur in people with previously compromised immune systems creates the perfect storm for 5G radiation to finish the job on the respiratory system. This is a brilliantly engineered bioweapon.

And now we are beginning to piece the puzzle together to determine that C 19 and 5G are a package deal. A 5G network was rolled out at both Wuhan and the Princess Cruise ship that was struck down with C 19. Additionally, 5G EMF, or analogs thereof, such as cellphone presence, can be linked to heavy infection spots in Italy, California, NYC, Denmark, Japan, etc... virtually anywhere the C 19 seems to strike hard.

Lastly, as nightmarish as this sounds, the normal cellphone may be activating this C 19 protein splice and creating the mass illness. Afterall, cellphones are virtually everywhere. And it is not the cellphone tower that gives you the EMF radiation. It is the cellphone, itself.

5G Effects Where C 19 Was Said to Be

Here's some factual research on just a few countries where this massive worldwide hoax is being used to C 19erup the rollout of 5G, in conjunction with existing toxic generations of this killing tech. Coincidence or C 19erup?

China

Wuhan, in the Province of Hubei was the epicenter for this hoax virus used to C 19erup their rollout of 5G in October 2019, the first city to go live with this known wireless technology killer.

Coupled with Wuhan's residents suffering from severe respiratory and associated illnesses caused by an existing and very large waste incinerator plant, 5G has created what can only be described as a 'kill zone' for the inhabitants.

We have all seen people keeling over, from a complete standing position in the streets, straight onto their faces. These incidents have been caused by a lack of oxygen in the immediate environment of the victim along with other key factors deleterious to biological systems, well known adverse impacts of millimeter waves (5G), as proven by a plethora of scientific research papers dealing with the severely adverse impacts of this toxic technology.

It appears that China has switched off large swathes of 4G and 5G country-wide, as clearly demonstrated in this map and the fact that no more cases are being reported.

Italy

The people living and working in the Lombardi region of Italy have been hit hard by the country's 'test bed' for the rollout of 5G, overlaying an existing

and extremely saturated 4G environment. It's little wonder that illness and fatalities have been experienced a great deal more in this location than in any other regions within the country.

Milan and the surrounding urban areas are undoubtedly the most saturated locations for toxic 4G and 5G emissions. It's clearly evident that the Italian 5G button pushers failed to get the memo about turning this toxic EMF military-grade millimeter waves off, as shown by the continued rise in cases in this region.

Germany

North Rhine-Westphalia, Germany has been the worst hit area of this virus hoax and C 19erup of the horrendous impact of wireless radiation. Coincidentally, this region has the densest build-up of 4G in the country. Other regions have 4G but not to the point of complete saturation as can be evidenced in the northwest of the country.

5G EMF and C 19

The 5G system is a Wi-Gig wireless network that operates in the 60GHz spectrum with a download speeds of up to 10 Gbps compared to the 4G download speed of 10 Mbps.

However, the frequency of 60 GHz is the frequency at which oxygen molecules oscillate. At 60 GHz, 98% of the transmitted 5G energy will be absorbed by atmospheric oxygen which then alters the orbital properties of the electrons of the oxygen molecules. "'60GHz is the frequency of oxygen molecule absorption. Oxygen molecules have electrons that they share with each other, oxygen is a diatomic molecule. What we breathe are two oxygen molecules bonded together with the electrons that they share." When the oxygen molecule is hit with 60GHz 5G waves, these waves affect the orbital resonance properties of those shared electrons. It is those shared electrons that

bind to the hemoglobin in our blood.' When the oxygen is disrupted, it will no longer bind to the hemoglobin and myoglobin (oxygen carrying molecules) and therefore will not be able to carry oxygen to the cell's powerhouse 'mitochondria'. Without oxygen, the liver becomes congested and the body, and brain, begins to break down due to slow suffocation.

Because the brain is the body organ most sensitive to the lack of oxygen, not getting enough oxygen to the brain will result in brain hypoxia. Brain hypoxia symptoms range from mild to severe.

Mild symptoms include:

- cognitive disturbances
- temporary memory loss
- reduced ability to move your body
- difficulty paying attention
- dry cough
- vertigo
- nausea
- respiratory failure
- difficulty making sound decisions

Severe symptoms include:

- fainting
- pneumonia
- seizure
- coma
- brain death

The CV masks play another role in restricting your breathing ability. You cannot pull normal amount of air to fill your entire lungs. So, you end up getting less oxygen because you're getting less air.

Note: What do 5G and masks have in common, they both lead to oxygen deprivation!

The spectrum for 4G starts from 700 MHz to 5 GHz frequency bands. "Compared to the frequencies below 5 GHz previously used by mobile devices, millimeter wave technology allows transmission on frequencies between 30 GHz and 300 GHz. These frequencies are called millimeter waves because they have wavelengths between 1 mm and 10 mm, while the wavelengths of the radio waves currently used by smartphones are mostly several dozen centimeters."

Health Effects of cumulative low intensity Radio Frequency radiation exposure include:

- DNA mutations
- Mitochondrial damage
- Tumors, cancer (children's skulls receive more radiation)
- Heart palpitations
- Memory and cognitive problems
- Sperm changes and infertility
- Headaches, migraines, ringing of ears
- ADHD
- Anxiety
- Depression
- Heart Disease
- Type-2 Diabetes

Radiofrequency/microwave (RF/MW) radiation affect the Schumann Resonance signals which are the mechanism through which melatonin production is activated.

Note: The frequencies also affect the body's ability to produce Vitamin D (Vitamin D deficiency causes cold and flu due to the weakening of the immune system. This is the reason why people are prone to cold and flu in the winter season).

Note: The electromagnetic radiation in the microwave frequency range 'are absorbed by water, fats, sugars, and certain other molecules, whose consequent vibrations produce *heat*.' Similar to microwave ovens which generate radiation at a frequency of about 2.45GHz (the microwave energy is converted to thermal energy by causing water molecules to flip back and forth some 2.45 billion times a second…The 60 GHz used by the 5G system causes water molecules to flip back and forth 60 billion times a second!!!)

Note: Main symptoms of CV: Shortness of breath, Coughing, Fever. They have also shown how people suddenly fall down with seizures which are the same symptoms caused by severe brain hypoxia.

--Nicolas Bonneau

The C 19 Hoax Hypothesis

This CV C 19 is a hoax. Stop buying into the fear mongering propaganda. This is just an excuse for Martial Law. 5G radiation sickness mimics the effects from a high-grade flu. All of the weird social restrictions are conditioning people to accept Martial Law, I'm talking about being forced to stand 6 ft apart from one another in lines and all of the other strange precautionary measures. This helps reinforce your be**LIE**f that there is a deadly virus going around. The only dangerous virus you are going to get will be in the form of vaccines. In Gematria all of these virus names deduce to 9-11. This is

how you know it's a hoax. They have been encoded with 9-11, as many hoaxes are, or they're encoded with 33, 666, 9's etc. All numbers used in Freemasonry. It is time to wake up and look into UN Agenda 21-30 because it is here. You are living in the end times and do not think it won't get worse because things can change within the blink of an eye. Now's the time to get your affairs in order and do whatever it takes to protect your family. Start stocking up on water and nonperishable foods but do not start emptying shelves at your local markets because if you do then you will be a part of the problem. Use common sense. Get first aid supplies and if you can Military issue MREs Meals Ready to Eat. Order plenty and keep them in a safe place. If you do not have enough ammo now would also be the time to go out and get some.

Radiation sickness is lethal. If you are feeling ill, then chances are this is why. 5G radiation sickness mimics flu symptoms. C 19 and 5G radiation sickness have identical symptoms. Now is not that interesting? 5G interferes with the oxygen molecule making it hard to breath. Soon everyone will be scrambling to go out and vaccinated. Again, the solution will be masked in the form of a cure-all vaccine but there will be no cure, only more death and sickness. I am afraid the only cure for radiation sickness will either be fully led lined suits or a bulldozer to knock down the many 5G towers that line our cities. --Ian Theorem

Cytokine Release Syndrome Hypothesis

One hypothesis is that C 19 does not kill. Your own immune system kills you via the Cytokine Release Syndrome.

"Cytokine Release Syndrome (CRS) or cytokine storm syndrome (CSS) is a form of systemic inflammatory response syndrome (SIRS) that can be triggered by a variety of factors such as infections and certain drugs. It occurs when large numbers

of white blood cells are activated and release inflammatory cytokines, which in turn activate yet more white blood cells. CRS is also an adverse effect of some monoclonal antibody drugs, as well as adoptive T-cell therapies. Severe cases have been called cytokine storms. When occurring as a result of drug administration, it is also known as an infusion reaction." --Wikipedia

The Pirbright Institute Owned CV

Ignored by the mainstream media (as well as most alt-media), the patent for the CV is owned by The Pirbright Institute, Pirbright, UK (U.S. Pat. No. 10,130,701)–funded and operated by Welcome Trust, Bill and Melinda Gates Foundation, U.S. Department of Defense (DARPA-CDC), EU, World Health Organization, British Ministry of Defense (DERA). See AFI. (Jan. 30, 2020). CV traced to the British Crown. Americans for Innovation.

The man who donated the land for the Pirbright Institute was Henry [Rothschild] de Worms 1st Baron Pirbright around 1903.

Jordan Sather Suggests that the CV Outbreak was Planned

As the United States reported its first case of the CV last week, several patent documents started to circulate on Twitter and Facebook that at first glance appear to suggest experts have been aware of the virus for years. One of the first users to float these allegations was conspiracy theorist and YouTuber Jordan Sather. 2/26/2020 China CV: Misinformation spreads online about origin and scale - BBC News

In a lengthy thread that has been retweeted thousands of times, he shared a link to a 2015 patent filed by the Pirbright Institute in Surrey, England, that talks about developing a weakened version of CV for potential use as a vaccine to prevent or treat respiratory diseases. The same link has also been widely circulated on Facebook, mainly in conspiracy and anti-vaccination groups. Sather used the fact that the Bill & Melinda Gates Foundation is a

donor to both Pirbright and vaccine development to suggest that the current outbreak virus has somehow been deliberately manufactured to attract funding for the development of a vaccine. "And how much funding has the Gates Foundation given to vaccine programs throughout the years? Was the release of this disease planned? Is the media being used to incite fear around it?" Sather tweeted.

Is the New 'Deadly China Virus' A C 19ert Operation?

- New virus in China.
- Watch out!
- Spreading!
- Animals to humans?
- Pandemic coming up.
- Obey medical authorities.
- All hands-on deck!
- Centered in Wuhan.
- City of 11 million.
- Will they quarantine and shut down Hong Kong?
- Travelers with the virus getting through to Europe and America?
- What is the name of the virus?
- Thank god the Chinese are under a tight dictatorship!
- They can crack down and quarantine anybody on a whim.
- If your body temperature is elevated on a test, they stop you?
- Wow, we may need that in the USA, as long as they do not stop me!

In the 19 years of this website, the one story I have researched and C 19ered more than any other is the DEADLY VIRUS hustle. SARS, Swine Flu, Ebola, etc. Now, we have a new one. The possible maybe CV from China.

In each case of these could-be killers, we have an official warning. "This could be the big one." Millions of people could fall ill and die. In each case, there are travelers. "People returning from X have the virus and they are spreading it." In the case of SARS and Swine Flu, the patients' symptoms were typical "flu" symptoms: fever, fatigue, cough, weakness. In other words, there was no reason to think the "new disease" was any different from ordinary traditional illness.

The big and only difference is the claim that researchers have found a new virus as the cause of illness.

But in each case, there are serious problems with that claim.

First, only "official researchers" are involved with the "disC 19ery" of the new virus. There is no confirmation from independent researchers. For example, in the case of SARS (2003), ten labs belonging to the World Health Organization (WHO) performed the "disC 19ery" of that CV. They were connected through closed circuit—no outsiders allowed.

Eventually, a Canadian biologist working for WHO, Frank Plummer, told the press he was quite puzzled by what he was seeing: more and more SARS patients did not have the SARS virus at all. In fact, almost no new SARS patients had the virus. Well, when you stop and think about that ridiculous state of affairs, you realize you can't say a person, with ordinary flu-like symptoms, is suffering from a new disease if he doesn't have the cause of that disease. But the mainstream press took no notice of this and moved on.

In the case of the Swine Flu "epidemic" (2009), the US Centers for Disease Control (CDC) was reporting thousands of cases in America—but CBS star reporter Sharyl Attkisson found out that the CDC had, mysteriously,

stopped counting cases. How could this be? She came up with the devastating answer. The overwhelming percentage of blood tests on Swine Flu patients were coming back from labs with no sign of the Swine Flu virus or any other flu virus. That story ran on the CBS News site, but as Attkisson told me in an interview, the bosses at CBS would not allow it on the national television news broadcast. Censored. And that was the end of the CBS exposure of the Swine Flu hoax. Yet, as I reported: about three weeks after CBS shut down the story, WebMD ran a piece in which the CDC estimated there were 22 MILLION cases of Swine Flu in the US. If your head is spinning, it should be.

The second major problem with the announcement of a "new disease" or an epidemic is the absence of research on what we could call the "infection factor." Let me explain. To even begin to say a particular germ is causing a particular disease, you have to prove the germ is present in a patient's body IN GREAT NUMBERS. A few little viral particles floating around here and there are irrelevant. You need millions. So if an ignorant doctor or a researcher states, "Well, this patient has the CV, so he has the disease," he's falling far short of proving anything useful. Where are the tests proving the patient has millions of the virus in his body? Nowhere.

The third major problem with the announcement of a "new disease" or an epidemic is the "test factor." What test is being run on a patient to prove he has the "new virus" in his body? Most of the time, it is an antibody test. Stay with me here, this is important. Prior to 1984, it was generally recognized that a positive antibody test was a good outcome. In short, it indicated that the patient's immune system had come in contact with a germ and successfully defeated it. But then, for several reasons, this science was turned on its head. A positive antibody test, from that time on, was evidence that the patient currently had the disease in question. Boom. Now, disease numbers could easily be inflated. And they were. And they are.

Automatically assuming that the announcement of a possible epidemic is accurate—well, it is a major mistake, to say the least.

The CDC and WHO are operated by virus hunters. Running a new virus up the flagpole is their stock in trade. They rush to an area where an "outbreak" has been announced, and they roll up their sleeves and look for the virus. They pay no attention to environmental factors, such as contaminated water supplies or toxic chemicals or malnutrition or lack of basic sanitation.

Epidemics are good for business. Pharmaceutical business, inducing fear business, shutting down travel business, diverting the public from key events business, surveillance, and quarantine business, and so on.

I am sure, at some point, there will be THANK YOU, CHINA, BUSINESS, too. Thank you, China, for your rule by iron fist over the population. Your ability to stop anyone for any reason and test for "the virus" may have saved the planet from an extinction event. Freedom? Forget it. Public safety is the ace in the deck. It wins every time. Hell, we may need a good epidemic in the US, so we can exert more control over the unruly citizenry. The doctor is king. Do what he says. Always. How many vaccines are there now? Take all of them. Everyone must.

Nineteen years ago, when I started this website, I told you that, of all the cartels in this world, the most important and powerful one, long-term, was the medical cartel. Nothing since that time has changed my mind.

--https://blog.nomorefakenews.com/2020/01/22/is-the-new-deadly-china-virus-a-C 19ert-operation/

C 19ert C 19

There is additional anecdotal, deductive, and empirical evidence which, in conjunction with the flu surveillance data, supports the theory that C 19ID was established in the US well before the first confirmed case.

For example, in my own story, I describe how and why I believe my family already had C 19 in January and February. The symptoms we exhibited were specific enough to warrant the assumption of C 19ID infection under current CDC guidelines.

And we are not the only ones.

If we allow for an earlier seed date, hundreds of thousands of flu-like illnesses that occurred in the months before the first officially recognized US case can also retrospectively be characterized as C 19ID, based on their symptoms alone.

When we do not know what we are looking for and we do not question assumptions, information that might otherwise seem obvious can go unnoticed. But when we do look for evidence, it's not difficult to find. And as antibody tests become available, there will be more and more data about who has already been infected.

Why this matters so much

A better understanding of where the C 19ID curve begins will improve anticipation and rationing of healthcare resources — both among C 19ID cases and for people with non-C 19ID related illnesses who need medical care.

The path forward for C 19ID, US healthcare, and the global economy is vastly different when you assume November 2019 was the beginning of the pandemic. Shifting the C 19ID seed date 60 days back in time means the impending peak that everyone fears 60 days from now may be happening in real-time.

It means that we are grossly overestimating the case fatality rate and that what we fear is just the beginning may actually be the peak.

It's possible that the C 19ID curve is already flat because if we are at or nearing the peak, we are effectively coping with the healthcare demand, and a

large segment of the US population may already be immune, rendering most, if not all, of the impending economic damage unnecessary.

If C 19ID began 60 days earlier, canceling "elective" healthcare procedures, closing schools, and shutting down the economy is too high a price to pay to slow the rate of transmission of a disease that is slowing on its own and has a much lower case fatality rate (CFR) than initially assumed.

I will admit that I have a horse in this race. Five of them, actually. I'm one of the millions of people paying that exceedingly high price.

Fifteen months ago, I was diagnosed with a tumor in my liver. Because of its location, the risk/benefit of performing a diagnostic biopsy on the mass was too low to justify proceeding, so my oncologist took a watch-and-wait approach. Six months ago, I was relieved by a follow-up scan that indicated it had not grown. Nonetheless, in the last two weeks, I have developed GI symptoms that are consistent with the tumor spreading. As of now, I am unable to get a scan to rule out the possibility of metastasis of my disease because the imaging necessary to monitor my liver is considered "elective". And when the healthcare system does finally come back online, the backlog of patients like me will result in even more delays to access.

Should the worst-case come to pass for me, and I later disC 19er that I do have cancer that has spread and we missed the window to diagnose and treat it, my life will be one of many casualties of the C 19ID response. My four daughters will grow up without their mother and will likely be left in the custody of their father whom they currently only see every other weekend (two of them are completely estranged for him) and who has recently lost his job as nurse administrator of an outpatient orthopedic surgical facility due to CVOID-19. The owners were forced to shut the facility down a week ago because the governor of our state issued a ban on elective surgeries. His financial stability is doubly in question because the economic security measures

that have been put in place for individuals affected by C 19ID specifically exclude healthcare workers.

So, in my little family alone, not only are my kids suffering the typical cabin fever and educational setbacks, but I have lost most of my freelance writing income, their father has lost his job which provided 50% of our financial support, we were not able to pay rent yesterday, and I am unable to obtain what could potentially be life-saving health care.

The current cumulative total of hospitalized C 19ID patients in my home state of Arizona as of this writing, and for which all of these sacrifices are being made, is 228. And that's the cumulative number than has been accruing since March 24th, not the number currently hospitalized.

Arizona has 14,790 hospital beds. Our curve is flat.

My family is making mandated sacrifices in order to reserve capacity in the healthcare system for C 19ID patients who do not currently (and likely will never) exist — all because the C 19ID curve predicated on an inaccurate seed date says that the overwhelming surge is just barely beginning.

And our circumstances are not special.

Just in the realm of "elective" healthcare, melanomas across the nation are metastasizing because routine mole checks are not being conducted. Cancers are going unrestricted because hospitals are not allowed to do most surgeries. Early diabetes is going undiagnosed because you cannot do A1C bloodwork with closed labs. Both lifesaving and quality-of-life-preserving care is being withheld because we are conserving capacity for C 19 patients that, in a lot of areas, will never materialize.

And, health-related considerations aside, we are also wrecking the livelihoods of millions of Americans in service of preventing transmission among many who have likely already been exposed and reC 19ered.

Ten million Americans filed for unemployment in the month of March. Small businesses are being forced to choose between closing their doors and incurring crippling long-term debt. The economy is teetering on collapse. Careers are being demolished. Retirement savings are vanishing. Children are trapped in abusive homes and domestic violence reports are sky-rocketing all because — in our panic — we never critically questioned when the C 19ID curve really began.

This is not who we are

We have a chance to gather more information and stop this. We have information at our fingertips that could help us pinpoint exactly where we are on the curve, determine an accurate case fatality rate, and tailor less draconian mitigation measures specific to each geographic locale. We have the ability to tailor responses to specific areas and support communities hardest hit by the surge, like NYC and Louisiana. The U.S. just approved a test for C 19ID antibodies.

According to the New York Times:

"People with immunity might be able to venture safely from their homes and help shore up the work force. It may be particularly important for doctors and nurses to know whether they have antibodies."

Antibody testing eventually should give scientists a better sense of how widespread the infection is in the population and help researchers calculate more precisely the fatality rate and the frequency of asymptomatic infections.

What will it take for antibody testing to become a priority for US health officials? What happens when we look at the C 19ID response devastation in the rearview mirror and say, "That didn't have to happen after all."?

I hope I am here to see it.

The possibility that we may be 60 days in time from where we have been told we are should be good news. The idea that right now may be as bad as it's going to get should be elating. We should be clamoring to determine the least-restrictive, most-effective way to manage this novel outbreak.

But I know that there is a difference between "shoulds" and what actually is. We have been too busy shaming our neighbors for getting fresh air and hoarding toilet paper to consider that we are being driven by fear, not fact and that it has shut down our ability to recognize inconsistencies and look for answers. Instead, we call anyone who questions the "sky is falling" narrative selfish, stupid, and irresponsible because aligning with the prevailing moral outrage renders us impervious to criticism.

And I do not recognize us. That is not who we are.

We are Americans. We are innovative, resourceful, diverse, and dynamic. We are capable of addressing both the lethality of C 19ID and our economic stability. We are capable of protecting the sick and the vulnerable without requiring the world to come to a standstill with no idea how to restart it.

The most valuable tool we need in order to perform metaphorical surgery on this outbreak is accurate information. And to get that information, we have to be open to the idea that some of our fundamental assumptions about C 19 are wrong. --https://www.morozkoforge.com/post/the-curve-is-already-flat

5G Network Uses Same Frequency as Weaponized Crowd Control Systems

Today's cellular and Wi-Fi networks rely on microwaves – a type of electromagnetic radiation utilizing frequencies up to 6 gigahertz (GHz) in order

to wirelessly transmit voice and data. This era of wireless frequency is almost over making room for new 5 G applications will require using new spectrum bands in much higher frequency ranges above 6 GHz to 100 GHz and beyond, utilizing submillimeter and millimeter waves.

5G-Crowd-ControlMillimeter waves are utilized by the U.S. Army in crowd dispersal guns called Active Denial Systems. Dr. Paul Ben-Ishai pointed to research that was commissioned by the U.S. Army to find out why people ran away when the beam touched them. "If you are unlucky enough to be standing there when it hits you, you will feel like your body is on fire." The U.S. Department of Defense explains how: "The sensation dissipates when the target moves out of the beam. The sensation is intense enough to cause a nearly instantaneous reflex action of the target to flee the beam."

It uses radio frequency millimeter waves in the 96GHz range to penetrate the top 1/64 of an inch layer of skin on the targeted individual, instantly producing an intolerable heating sensation that causes them to flee.

A lot of respected people have posted warnings about the mass deployment of commercial millimeter-wave technology.

Devra Lee Davis – Founding Director of the Board on Environmental Studies and Toxicology of the U.S. National Research Council, National Academy of Sciences, Founding Director of the Center for Environmental Oncology, University of Pittsburgh Cancer Institute, who has taught at the University of California, San Francisco and Berkeley, Dartmouth, Georgetown, Harvard, London School of Hygiene and Tropical Medicine and other major universities, and has had articles published in Lancet, Journal of the American Medical Association to Scientific American, the New York Times and elsewhere – says that the 5G wavelengths used in IoT have never been tested for health effects, and may adversely impact our skin and sweat glands:

5G networks will support the coexistence of multiple standards (e.g., LTE, WiFi) and coordinate with various site types (macro, micro, and pico base stations). A premier challenge of 5G network design has been to create a

network architecture capable of supporting this kind of flexibility while meeting the multifaceted access demands of an Internet of Things (IoT) future

--https://www.rfsafe.com/5g-network-uses-nearly-same-frequency-as-weaponized-crowd-control-systems/?fbclid=IwAR2AgCGzuCG0yTdLZzlscyipT490400QPOkS8h5S2rIzzyE9V9DJPBAuZOI

Why 5G Cell Towers Are Dangerous

All cell towers emit Radio Frequency (RF) Radiation. There are literally hundreds of peer reviewed scientific studies from around the world that have linked this “non-ionizing” form of electromagnetic radiation to things like cancer, DNA damage (especially in infants and fetuses), and infertility. And Kevin Mottus of the US Brain Tumor Association says that within the radio frequency portion of the electromagnetic spectrum, the higher the frequency, the more dangerous the radiation is.

5G Cell Towers are More Dangerous for Two Main Reasons

First, 5G emits “ultra-high frequencies”. The higher the frequency, the shorter the length of each wave. This means more waves hit our bodies in the same amount of time. Previous cellular generations emitted from 1 to 6 GHz frequencies. 5G cell towers may emit frequencies as high as 300 GHz.

Second, 5G technology requires “ultra-high intensity”. Since the shorter length millimeter waves (MMV) used in 5G do not travel as far (and get obstructed easier), with our current number of cell towers the cell signal will not be reliable. To compensate 5G cell towers will have to emit the lower 3G & 4G waves as well, and many more “mini cell towers” will have to be installed. It is estimated that they will need a mini cell tower every 2 to 8 houses. All of this combined will greatly increase our RF Radiation exposure.

With RF Radiation, how close the source is to our physical bodies is more important than the power level (or wattage) of the radiation. RF Radiation dissipates with distance. In other words, a low powered exposure right next to someone, is more dangerous than a more powerful exposure a

long way away. Also, the longer the exposure time is, the more dangerous it is. 5G will be the worst of both worlds. We will have more sources around us, and closer to us. And they will be more powerful and continuous emissions.

--https://www.radiationhealthrisks.com/5g-cell-towers-dangerous/

5G Exacerbates C 19 (The Flu)

5G and Electromagnetic Fields (EMF), in general, may exacerbate the C 19 (The Flu) strain and make it more lethal to some. In other words, the common flu may be aggressively "activated" or "triggered" in the presence of the 5G network.

It is already clear from over 10,000 studies on 2G, 3G, and 4G that these wireless network radio frequency (RF) radiation network systems are causing significant acute and chronic health problems, including life-threatening diseases such as cancer, heart disease, type-2 diabetes, and mental disturbances, such as depression, anxiety, and increased suicidal tendencies.

Beyond the statements of informed individuals decrying the 5G "rollover", there are also major organizations warning of its dangers. The International Appeal to Stop 5G on Earth and in Space currently boasts approximately 31,300 signatories as of January 11th, 2019.

They write:

"We the undersigned scientists, doctors, environmental organizations and citizens from countries, urgently call for a halt to the deployment of the 5G (fifth generation) wireless network, including 5G from space satellites. 5G will massively increase exposure to radio frequency (RF) radiation on top of the 2G, 3G and 4G networks for telecommunications already in place. RF radiation has been proven harmful for humans and the environment. The deployment of 5G constitutes an experiment on humanity and the environment that is defined as a crime under international law."

In conclusion, in 2015, 215 scientists from 41 countries communicated their alarm (about the potential of 5G) to the United Nations (UN) and World Health Organization (WHO). They stated that "numerous recent scientific publications have shown that EMF [electromagnetic fields] affects living organisms at levels well below most international and national guidelines". As already stated, more than 10,000 peer-reviewed scientific studies demonstrate harm to human health from RF/MW radiation.

Effects include:

1. Alteration of heart rhythm
2. Altered gene expression
3. Altered metabolism
4. Altered stem cell development
5. Cancers
6. Cardiovascular disease
7. Cognitive impairment
8. DNA damage
9. Impacts on general well-being
10. Increased free radicals
11. Learning and memory deficits
12. Impaired sperm function and quality
13. Miscarriage
14. Neurological damage
15. Obesity and diabetes
16. Oxidative stress
17. Autism
18. ADHD
19. Asthma
20. Negative altered mental states, including increased depression, anxiety, and suicidal tendencies

One can easily see the overlap between EMF and C 19OD 19 symptoms, and it may difficult to say which is more at play, right now.

--Jon Rappoport

The Invisible Enemy May Not be a Virus

1. 5G Electromagnetic Radiation
2. Hypoxia Related Respiratory Failure
3. RIOP Pneumonia
4. Thrombosis
5. Over Engaged Fight-or-Flight Mechanism
6. High Cortisol Levels
7. Type 2 Diabetes
8. Death

Immune System Damage and Hypoxia Related 5G Electromagnetic Radiation in Exacerbating CV

A Look at ICU Ventilators and Ventilator Settings

Ventilators help a patient breathe by assisting the lungs to inhale and exhale air. These machines are used to treat patients suffering from conditions including pneumonia, brain injury and stroke.

The SARS-C 19-2 virus (which causes the C 19 disease) attacks the respiratory system. When infected, a patient's ability to breathe is compromised. In mild cases, breathing or respiratory support can be provided using noninvasive means, such as delivering oxygen-rich air through a face mask.

In more severe cases, when a patient suffers acute respiratory distress, an invasive form of respiratory support is required. This is provided through an artificial airway. A tube attached to a ventilator is inserted into the patient's mouth or nose (and down the windpipe), or via a surgically made hole in the neck.

Breathe in Breath Out

The principal function of a ventilator is to pump or blow oxygen-rich air into the lungs; this is referred to as "oxygenation". Ventilators also assist in the removal of carbon dioxide from the lungs, and this is referred to as "ventilation".

One basic type of ventilator is the Bag Valve Mask (BVM). The BVM, also known as the **Ambu Bag**, is operated manually by a person squeezing a self-inflating bladder. This is an essential tool for ambulance crews, first responders and critical care units. It is light, compact, and easy to use.

However, in situations where a steady and controlled air exchange (oxygen in, carbon dioxide out) is needed, mechanical ventilators are required. These look like a quintessential medical product.

The Conversation/EPA/AAP

A mechanical ventilator comprises a computerized box that sits on top of a mobile trolley. There is an array of screens, dials, data cables, power cords and gas tubes. Modern mechanical ventilators are extraordinarily complex and sophisticated pieces of equipment. Their increased complexity in comparison with the Ambu Bag allows a superior level of care.

The extra features and control measures of mechanical ventilators allow calibration adjustments such as:

1) how long inhalation for a patient lasts
2) how much air is received
3) how often air is received
4) the concentration of oxygen within the air (air is about 21% oxygen, but in some cases the percentage of oxygen is increased)

5) how much pressure the patient's lungs are inflated to
6) the temperature and humidity of the air.

https://theconversation.com/icu-ventilators-what-they-are-how-they-work-and-why-its-hard-to-make-more-135423

In summary:

In general, volume control favors the control of ventilation, and pressure control favors the control of oxygenation.

Volume and pressure control modes have distinct advantages and disadvantages which are mainly related to the flow and pressure patterns of gas delivery.

Volume control:

Advantages:
Guaranteed tidal volumes produces a more stable minute volume
The minute volume remains stable over a range of changing pulmonary characteristics.
The initial flow rate is lower than in pressure-controlled modes, i.e. it avoids a high resistance-related early pressure peak

Disadvantages:
The mean airway pressure is lower with volume control ventilation
Recruitment may be poorer in lung units with poor compliance.
In the presence of a leak, the mean airway pressure may be unstable.
Insufficient flow may give rise to patient-ventilator desynchrony.

Pressure control:

Advantages:
Increased mean airway pressure
Increased duration of alveolar recruitment

Protective against barotrauma
Work of breathing and patient comfort may be improved

Disadvantages:

Tidal volume is variable and dependent on respiratory compliance
Uncontrolled volume may result in "volutrauma" (overdistension)
A high early inspiratory flow may breach the pressure limit if airway resistance is high.

Adaptive control modes combine the advantages of pressure and volume control modes without the disadvantages.

A good example of an adaptive control mode of ventilation is PRVC, which guarantees a prescribed volume while maintaining a square pressure waveform and therefore a high mean airway pressure.

One disadvantage of the adaptive control targeting schema is that the mean airway pressure will be somewhat variable, depending on compliance and patient effort.

--https://derangedphysiology.com/main/cicm-primary-exam/required-reading/respiratory-system/Chapter%20542/practical-differences-between

Are CDC Protocol Driven C 19 Ventilation Settings Doing More Harm Than Good?

Physicians in the C 19 trenches are beginning to question whether standard respiratory therapy protocols for Acute Respiratory Distress Syndrome (ARDS) the best approach for are treating patients with C 19 pneumonia.

At issue is the standard use of ventilators for a virus whose presentation has not followed the standard for ARDS but is looking more like high-altitude pulmonary edema (HAPE) in some patients.

In a letter to the editor published in the American Journal of Respiratory and Critical Care Medicine on March 30, and in an editorial accepted for publication in Intensive Care Medicine, Luciano Gattinoni, MD, of the Medical University of Göttingen in Germany, and his colleagues make the case that protocol-driven ventilator use for patients with C 19 could be doing more harm than good.

Dr. Gattinoni noted that C 19 patients in intensive care units in northern Italy had an atypical ARDS presentation with severe hypoxemia and well-preserved lung gas volume. He and his colleagues suggested that instead of high positive end-expiratory pressure (PEEP), physicians should consider the lowest possible PEEP and gentle ventilation-practicing patience to "buy time with minimum additional damage."

Similar observations were made by Cameron Kyle-Sidell, MD, a critical care physician working in New York City, who has been speaking out about this issue on Twitter and who shared his own experiences in this video interview with WebMD chief medical officer John Whyte, MD.

The bottom line, as Dr. Kyle-Sidell and Dr. Gattinoni agree, is that protocol-driven ventilator use may be causing lung injury in C 19 patients.

Consider Disease Phenotype

In the editorial, Dr. Gattinoni and his colleagues explained further that ventilator settings should be based on physiological findings — with different respiratory treatment based on disease phenotype rather than using standard protocols.

"This, of course, is a conceptual model, but based on the observations we have this far, I don't know of any model which is better," he said in an interview.

Anecdotal evidence is increasingly demonstrating that this proposed physiological approach is associated with much lower mortality rates among C 19 patients, he said.

While not willing to name the hospitals at this time, he said that one center in Europe has had a 0% mortality rate among C 19 patients in the intensive care unit when using this approach, compared with a 60% mortality rate at a nearby hospital using a protocol-driven approach.

Ventilators Are Calibrated in Volume and Pressure Control for Pneumonia but C 19 Victims are Exhibiting Hypoxia Instead of Pneumonia

In the presence of electromagnetic radiation at the 60Ghz resonance frequency, the electrons on the oxygen molecules of the human lung system are robbed of electrons, in a type of Schumann Resonance facsimile between opposing 60Ghz oscillatory vibrations. The result is form of oxygen deprivation or hypoxia, where 5G EMF Radiation absorbs so much of the oxygen molecules electron cloud that the hemoglobin can no longer uptake oxygen.

It literally looks Hypoxia. Hypoxia is a condition in which the body or a region of the body is deprived of adequate oxygen supply at the tissue level. Hypoxia may be classified as either generalized, affecting the whole body, or local, affecting a region of the body. Although hypoxia is often a pathological condition, variations in arterial oxygen concentrations can be part of the normal physiology, for example, during hypoventilation training or strenuous physical exercise. The fact that C 19 victims are not responding to Ventilators has caused great concern amongst health care professionals, and so many doctors have looked closer into the satiation and have learned that the Ventilator settings that they received from the CDC are calibrated for Pneumonia victims and are killing the C 19 patients. These calibration are wrong because the C 19 patients are exhibiting high altitude sickness, Hypoxia, including a dry cough, non-characteristic of pneumonia, because their lungs have literally experienced oxygen depletion, with no excess fluid present in their lungs at all, as hundreds of x-rays have clearly demonstrated.

In other words, the Ventilator calibrations given to health professionals from The CDC are for CV based pneumonia, but C 19 victims are exhibiting Hypoxia instead of Pneumonia.

"The patients in front of me are unlike any I've ever seen. … They looked a lot more like they had altitude sickness than pneumonia," Dr. Cameron Kyle-Sidell, a Brooklyn, New York-based physician trained in emergency medicine and critical care, told Medscape, a website that provides medical information to health professionals.

5G 60Ghz EMF May Interfere with Hemoglobin Transport

In worked with genetic testing using PCR, tests can give unreliable data if the correct controls are not used, resulting in false negatives or false positives. In the case of C 19, false positives seem to be huge a problem.

Now, Exosomes are a result of cellular stress or toxicity and are the budding of genetic material from cells as part of the immune response. For a PCR test to work correctly, the "virus" must first be isolated, purified, and sequenced. The diagnosis from China was based upon assumption that this disease was viral. Assumptions can be extremely dangerous when treating patients and can often lead to misdiagnosis and medical complications. And so, we need to search for the root cause of this cellular stress or toxicity. And, we have numerous options.

What we do know is that this disease was first observed in Wuhan and emerged quite rapidly. So, what changed in Wuhan that was so sudden that it and was a source of cellular stress or toxicity. We do know that a massive infrastructure of 5G networks went up in Wuhan at the time of the C 19 disclosure. Sources of electromagnetic radiation interfere with cellular signaling at the right frequencies and energies, in the same way as LED bulbs emitting blue light interfere with the pineal gland and cell signaling.

5G Disruption of the Bond Angle of Oxygen Molecule Electrons

Another form of electromagnetic radiation is Wi-Fi. Wi-Fi driven cellphones have been proven to be unhealthy, long term, in countless scientific papers on the long-term effects of electromagnetic radiation and the human immune system. What about the 5G network? Obviously, 5G is a form of EMF but a quite different form, using different frequencies and energies than its more amicable predecessors, 2G, 3G, and 4G. 5G does not have a long range and is blocked by physical objects. 5G needs to be boosted at regular distances and is known to interfere with oxygen molecules in the water inside the human body. 5G interferes with the bond angle of oxygen molecules in water. The one lone electron exerts a less repulsion than normal on the two bonding oxygen atoms, so they can spread out more to a 134 degrees bond angle from the ideal of 120 degrees. All oxygen atoms have an octet of electrons.

In stands to reason that any deformation of bond angle or electron sharing of molecules could interfere with hemoglobin transport Just imagine what it could do at the atomic level of a person's hemoglobin transport system. It could literally suffocate a person by depriving their lungs of precious oxygen molecules through excessive ***Oxidative Stress.**

***Oxidative Stress contributes to many pathological conditions and diseases, including cancer, neurological disorders, atherosclerosis, hypertension, ischemia/perfusion, diabetes, acute respiratory distress syndrome, idiopathic pulmonary fibrosis, chronic obstructive pulmonary disease, and asthma**

China launched the world's largest 5G network in October 2019. Some researchers into the relationship between 5G and Immunology have put forth the claim that 5G damages the immune system, leaving affected individuals highly exposed to the disease. They allege that 5G mobile networks are being deployed in high frequency bands of up to 60 GHz, thus causing ionization of the oxygen molecules in the air. This process potentially splits the molecular

electron bonds which then deprives the human body of oxygen, causing Hypoxia related Thrombosis, stroke, and death if prolonged.

Ionizing Radiation

Ionizing radiation is a type of energy released by atoms that travels in the form of electromagnetic waves (gamma or X-rays) or particles (neutrons, beta or alpha). The spontaneous disintegration of atoms is called radioactivity, and the excess energy emitted is a form of ionizing radiation. --Wikipedia

A Link Between Hypoxia and Thrombosis

Summary:

Researchers have found how hypoxia (a low concentration of oxygen) decreases Protein S, a natural anticoagulant, resulting in an increased risk for the development of potentially life-threatening blood clots (thrombosis). Although hypoxia has been associated with an increased risk for thrombosis, this research showed for the first time a molecular cause.

Full Story

Research led by Rinku Majumder, PhD, Associate Professor of Biochemistry at LSU Health New Orleans School of Medicine, has found how hypoxia (a low concentration of oxygen) decreases Protein S, a natural anticoagulant, resulting in an increased risk for the development of potentially life-threatening blood clots (thrombosis). Although hypoxia has been associated with an increased risk for thrombosis, this research showed for the first time a molecular cause. The work is published in the current issue of Blood.

"Hypoxia is common in many diseases including cancer, alcoholism, sickle cell anemia, nonalcoholic fatty liver disease and more," notes Dr. Majumder. "Human Protein S (PS) is a natural blood anticoagulant. Although disC 19ered 40 years ago, the exact mechanism of PS's anticoagulant action was deduced only in the last few years. Our earlier work found that PS inhibits a key clotting protein, Factor IXa. We knew that PS deficiency could occur in

hypoxia but not why. With this study, our group identified the gene regulatory mechanism by which oxygen concentration controls PS production."

Because Protein S is primarily produced in the liver, the team of researchers cultured human Hepatocellular Carcinoma cells at normal oxygen and also hypoxic conditions and then measured levels of the protein. They found that increasing hypoxia not only reduced PS but also significantly increased a protein that turns on the gene to produce hypoxia. This suggested that the protein, hypoxia-inducing factor 1, might regulate Protein S, which the researchers confirmed through biochemical and genetic approaches in a mouse model.

The research is included in the journal's "Issue Highlights" featured on the C 19er and is accompanied by a commentary that calls the disC 19ery "an important contribution to our understanding of the molecular basis of the augmentation of thrombosis by hypoxia."

"This study will open a new direction for targeting hypoxia-mediated thrombotic disorders," Majumder concludes.

--https://www.sciencedaily.com/releases/2018/08/180802115657.htm

Acute Hypoxemic Respiratory Failure

Acute hypoxemic respiratory failure is severe arterial hypoxemia that is refractory to supplemental oxygen. It is caused by intrapulmonary shunting of blood resulting from airspace filling or collapse (e.g., pulmonary edema due to left ventricular failure, acute respiratory distress syndrome) or by intracardiac shunting of blood from the right- to left-sided circulation. Findings include dyspnea and tachypnea. Diagnosis is by arterial blood gas measurement and chest x-ray. Treatment usually requires mechanical ventilation.

--https://www.merckmanuals.com/professional/critical-care-medicine/respiratory-failure-and-mechanical-ventilation/acute-hypoxemic-respiratory-failure-ahrf,-ards

Excessive Cortisol Levels Causing Blood Sugar Imbalance and Type 2 Diabetes

It has already been established that stress from an overactive fight-or-flight mechanism can send the Cortisol levels through the ceiling, wreaking havoc on the human immune system, as the body attempts to clean up the extra glucose through insulin.

However, elevated cortisol over the long term consistently produces glucose, leading to increased blood sugar levels. Theoretically, this mechanism can increase the risk for **Type 2 Diabetes** from an over stress Insulin mechanism

The Relationship Between Type 2 Diabetes, Blood Clots, and Stroke

Diabetes increases the risk of plaque buildup in the arteries, which can cause dangerous blood clots. Although blood clots routinely form as a normal function of blood cells to repair damaged blood vessel walls, clots become a problem when they prevent blood from flowing through an artery or vein inappropriately.

Nearly 80 percent of people who have diabetes will eventually die of clot-related causes. Signs and symptoms of blood clots depend upon their location and whether they occur in an artery or a vein.

A blood clot in an artery that supplies blood to the heart or brain may result in:

Stroke

--https://www.grmedcenter.com/the-relationship-between-diabetes-and-blood-clots/

Radiation Induced Organizing Pneumonia

Abstract

Radiation-induced organizing pneumonia (RIOP) is an inflammatory lung disease that is occasionally observed after irradiation to the breast. It is a type of secondary organizing pneumonia that is characterized by infiltrates outside the irradiated volume that are sometimes migratory. Corticosteroids work acutely, but relapse of pneumonia is often experienced. Management of RIOP should simply be symptom-oriented, and the use of corticosteroids should be limited to severe symptoms from the perspective not only of cost-effectiveness but also of cancer treatment. Once steroid therapy is started, it takes a long time to stop it due to frequent relapses. We review RIOP from the perspective of its diagnosis, epidemiology, molecular pathogenesis, and patient management.

The actual cause of death is also important in interpreting case fatality rates. Respiratory failure is obviously the main cause, as was also the case in previous viral pandemics, such as the Spanish flu of 1918. Today, however, many patients can be supported by invasive mechanical ventilation until the lungs reC 19er. If the situation deteriorates, use of extracorporeal membrane oxygenation (ECMO) systems can control gas exchange for weeks. C 19 is sometimes complicated by shock and multiple organ failure, but the real course of the disease is not yet well described. Knowing that non-survivors are more likely to have low lymphocyte counts or high C-reactive protein or D-dimer levels provides no information about the actual process of death. The precise role of secondary bacterial infections has also not been well defined.

--https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(20)30165-X/fulltext

The Preceding Chain of Factors Would Account for ER Doctors Witnessing C 19 Causing Blood Clots and Sudden Strokes in Young Adults

The new CV appears to be causing sudden strokes in adults in their 30s and 40s who are not otherwise terribly ill, doctors reported Wednesday.

There's growing evidence that C 19 infection can cause the blood to clot in unusual ways, and stroke would be an expected consequence of that.

Dr. Thomas Oxley, a neurosurgeon at Mount Sinai Health System in New York, and colleagues gave details of five people they treated. All were under the age of 50, and all had either mild symptoms of C 19 infection or no symptoms at all.

"The virus seems to be causing increased clotting in the large arteries, leading to severe stroke," Oxley told CNN.

"Our report shows a seven-fold increase in incidence of sudden stroke in young patients during the past two weeks. Most of these patients have no past medical history and were at home with either mild symptoms (or in two cases, no symptoms) of C 19ID," he added.

"All tested positive. Two of them delayed calling an ambulance."

Other doctors have also reported that people are reluctant to call 911 or go to emergency rooms because of the pandemic.

It is not common for people so young to have strokes, especially strokes in the large vessels in the brain.

"For comparison, our service, over the previous 12 months, has treated on average 0.73 patients every 2 weeks under the age of 50 years with large vessel stroke," the team wrote in a letter to be published in the New England Journal of Medicine. That is fewer than two people a month.

A stroke in a large blood vessel causes severe damage if it is not removed right away. At least one patient has died, and others are in rehabilitation facilities, intensive care or in the stroke unit. Only one went home but will require intense care, Oxley said.

"The average person who has a large vessel stroke is severely impaired," Oxley said. "It means it a bigger clot. It includes one of the largest arteries in the brain."

Brain cells die when blood flow is stopped, and the longer it's blocked, the wider the damage in the brain. Quick treatment is vital. "The most effective treatment for large vessel stroke is clot retrieval, but this must be performed within 6 hours, and sometimes within 24 hours," Oxley said.

Oxley said his team wanted to tell people to watch themselves for symptoms of CV infection and to call 911 if they have any evidence of stroke.

"Up until now, people have been advised to only call for an ambulance with shortness of breath or high fever," he wrote.

The easy memory device for stroke, he said, is "FAST": F for face drooping, A for arm weakness, S for speech difficulty and T for time to call 911.

--https://www.ctvnews.ca/health/CV/C 19-causing-blood-clots-sudden-strokes-in-young-adults-doctors-say-1.4910674

Conclusion: 5G EMF May be Causing Hypoxia Related Blood Clotting in CV Patients

And so, 5G EMF May be causing Hypoxia conditions in alleged C 19 victims, which in turn, causes blood clotting, which is consistent with what ER doctors are seeing with their C 19 patients

To iterate, in the presence of electromagnetic radiation at the 60Ghz resonance frequency, the electrons on the oxygen molecules of the human lung system are robbed of electrons, in a type of Schumann Resonance facsimile

between opposing 60Ghz oscillatory vibrations. The result is form of oxygen deprivation or hypoxia, where 5G EMF Radiation absorbs so much of the oxygen molecules electron cloud that the hemoglobin can no longer uptake oxygen.

Lastly, Wi-Fi driven cellphones have been proven to be unhealthy, long term, in countless scientific papers on the long-term effects of electromagnetic radiation and the human immune system. What about the 5G network? Obviously, 5G is a form of EMF but a quite different form, using different frequencies and energies than its more amicable predecessors, 2G, 3G, and 4G. 5G does not have a long range and is blocked by physical objects. 5G needs to be boosted at regular distances and is known to interfere with oxygen molecules in the water inside the human body. 5G interferes with the bond angle of oxygen molecules in water. The one lone electron exerts a less repulsion than normal on the two bonding oxygen atoms, so they can spread out more to a 134 degrees bond angle from the ideal of 120 degrees. All oxygen atoms have an octet of electrons.

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***Oxidative Stress contributes to many pathological conditions and diseases, including cancer, neurological disorders, atherosclerosis, hypertension, ischemia/perfusion, diabetes, acute respiratory distress syndrome, idiopathic pulmonary fibrosis, chronic obstructive pulmonary disease, and asthma**

China launched the world's largest 5G network in October 2019. Some researchers into the relationship between 5G and Immunology have put forth the claim that 5G damages the immune system, leaving affected individuals highly exposed to the disease. They allege that 5G mobile networks are being deployed in high frequency bands of up to 60 GHz, thus causing ionization of the oxygen molecules in the air.

This process potentially splits the molecular electron bonds which then deprives the human body of oxygen, causing Hypoxia related Thrombosis, stroke, and death if prolonged, just as ER doctors are witnessing in alleged C 19 victims.

The True Invisible Enemy

The Constellation of Variables Leading to Death Dubbed C 19

1) 5G EMF Radiation
2) Excessive Cortisol Level Caused Diabetes
3) Diabetes Causing Clotting
4) Stroke Predisposed Thrombosis
5) Causing Hypoxia Related Respiratory Failure in Patients with Pre-Existing CV
6) Resulting in Radiation-Induced Organizing Pneumonia (RIOP)
7) Resulting in Further Thrombosis (Blood Clotting)
8) Resulting in Death by Respiratory Failure, Stroke, Organ Failure, etc…
9) Finally, Misdiagnosed as Novel C 19 Virus as Cause of Death

And so, it is an amalgamation of multiple, quasi-clandestine variables, all coalescing into a singular constellation of symptoms that results in this illness dubbed C 19. And yet, no C 19 virus has been isolated in the process of testing for it. All they have found is the common CV that is in every human being all the time since birth. And some claim there was a “pShutte” gene insert, proving it was a manmade bioweapon, but who knows?

Potential Contributing Factors to the C 19 Symptomatology

1. EMF radiation

2. Environmental pollution
3. Poor nutrition
4. Excessively high cortisol levels
5. EMF induced Hypoxia
6. Thrombosis
7. Over worked autonomic nervous system
8. Chemtrails
9. Senescence
10. Pre-morbidity
11. The role of antigen response preparedness in the human immune system
12. Chemical toxins in the environment
13. Poison, infection (flu, pneumonia)
14. Stress
15. Toxic fungi, molds, protozoa, or bacteria in the immediate environment

List of 250 Scientists on The Health Risks and in Opposition of 5G

There are over 250 scientists and medical doctors who signed the 5G Appeal that calls for an immediate moratorium on the deployment of 5G and demand that our government fund the research needed to adopt biologically based exposure limits that protect our health and safety.

Scientific Appeal on 5G To the European Commission

"We recommend a moratorium on the roll-out of the fifth generation, 5G, for telecommunication until potential hazards for human health and the environment have been fully investigated by scientists independent from industry…RF-EMF has been proven to be harmful for humans and the environment."

2017 Scientific Appeal on 5G To the European Commission

There are 201,383 signatories from 202 nations and territories as of February 14th, 2020; Scientists (4,503), Engineers (8,036), Medical Doctors (2,593), Nurses (4,177), Psychologists, Psychotherapists and Social Workers (9,663), Doctors of Naturopathy, Homeopathy, Ayurveda and Medical Qigong (2,777), Doctors of Oriental Medicine (770), Chiropractors (412), Dentists (438), Pharmacists (552), Architects and Builders (3,137), Building Biologists (271), Veterinarians (344), Beekeepers (657), Other Professions (54,148), Citizens (78,082), Organizations (1,835)

2020 German Environmental Organization Bund Petition to stop 5G in Hamburg

"The electro-smog working group of German environmental organization Bund has delivered a petition with over 6.000 signatures to the First Mayor of Hamburg, Peter Tschentscher, opposing construction of a 5G network in the city. Bund believes that the expansion of 5G should take place only after testing the impact of the new technology on health and the environment"

2019 German Doctors Delegation:

70 doctors from Baden-Württemberg have signed the open letter to Prime Minister Kretschmann. The doctors' demand on Kretschmann is to minimize exposure to electromagnetic fields.

Stuttgarter Zeitung: Doctors protest against 5G mobile communications

Stuttgarter Nachrichten: Doctors protest against 5G mobile communications

TV report in Regio TV Stuttgart

The study overview (review) "Effects of high-frequency radiation of mobile phones and wireless devices on health and well-being" in German translation is available on the website of diagnostose: funk as a PDF download:

German Environmental Organization BUND

Hamburg – The environmental organization BUND is calling for an expansion stop for the latest 5G mobile network in Hamburg. Read news report that states.

“Without an assessment of health and environmental compatibility, the infrastructure should not be expanded, said regional manager Manfred Braasch in Hamburg. In addition, the mobile network is currently being expanded without the required technology assessment. The BUND handed over his demands with 6000 signatures to the mayor’s office of Mayor Peter Tschentscher (SPD).”

2019 Hippocrates Electrosmog Appeal of Belgium

The Appeal has been signed by over 347 medical doctors, nurses, and health professionals in Belgium.

“Faced with the massive and reckless deployment of wireless technologies, we health professionals are asking the government to apply the precautionary principle in order to protect the population and more particularly the most vulnerable groups, including pregnant women. and the children.”

2019 Position Paper of the Pancyprian Medical Association and Cyprus National Committee on the Environment and Child Health

The Pancyprian Medical Association and Cyprus National Committee on the Environment and Child Health position paper on 5G is entitled “The Risks to Public Health from the Use of the 5G Network” and was sent to the Cyprus Parliamentary Committees on Environment and Health. The position paper is based on the historic Nicosia Declaration of 2017.

The position paper emphasizes the lack of safety studies, the increase in exposure and the potential interactions of the network with other telecommunication networks. The paper also highlights the lack of a reliable method to measure the radiation levels in real world situations- an issue that was raised in the 2019 European Parliament Report “5G Deployment State of Play in Europe, USA and Asia “which states that, “ the problem is that

currently it is not possible to accurately simulate or measure 5G emissions in the real world.”

2019: Order of the Physicians of Turin: Resolution to suspend 5G

The Conference” Electromagnetic waves, effects on people’s health?” organized by the Environmental Commission of the Order of Physicians of Turin was held October 2019

“It is therefore requested that the Precautionary Principle be applied and the experiments be suspended at least until one is able to measure the electromagnetic field actually produced – waiting for the competent bodies to acknowledge the results of the scientific studies for the possible reformulation of the legal limits for long-term exposure of the population”

2018: The European Scientific Committee on Health, Environmental and Emerging Risks (SCHEER) Report

The report identified 14 emerging issues to bring to the attention of the Commission services including 5G, E-cigarette and chronic diseases. They prioritized 5G impact as “high” and concludes that “the lack of clear evidence to inform the development of exposure guidelines to 5G technology leaves open the possibility of unintended biological consequences.”

2018: International Society of Doctors for Environment Declaration on 5G

“An appeal for a standstill in the respect of the precautionary principle”

“Thus, in the respect of the precautionary principle and of the WHO principle “health in all policies”, we believe suitable the request of a standstill for the “5G experimentations” throughout Europe…”

5G ISDE Appeal link: 2015 EMF Scientist Appeal

The EMF Scientists are reputable scientists from 41 countries who have published peer reviewed research papers on electromagnetic fields who made a 2015 appeal to the United Nations and all member States in the world to encourage the World Health Organization “to exert strong leadership in

fostering the development of more protective EMF guidelines, encouraging precautionary measures, and educating the public about health risks, particularly risk to children and fetal development."

Letters and Briefings

Briefing on 5G Health Impacts by Dr. Martin Pall: "5G: Great risk for EU, U.S. and International Health! Compelling Evidence for Eight Distinct Types of Great Harm Caused by Electromagnetic Field (EMF) Exposures and the Mechanism that Causes Them"

November 19, 2018 – Magda Havas, BSc, PhD, Trent University, Peterborough, Canada – Open Letter: Need to Consider Health Effects Associated with Radio Frequency and Microwave Radiation before Deployment of 5G.

November 19, 2018 – Paul Héroux, Professor of Toxicology and Health Effects of Electromagnetism, McGill University Medicine, Montreal – Open Letter

November 21, 2018 – Yuri Grigoriev, Dr. Sc. Med., Professor, Academician of Russian Academy of Electrotechnical Sciences – Open Letter: From Electromagnetic Smog to Electromagnetic Chaos Evaluating the Hazards of Mobile Communication for Public Health

December 7, 2018 – David O. Carpenter, Director, Institute for Health and the Environment, University at Albany, State University of New York – Open Letter to Ministers and Members of Parliament of the Brussels Capital Region

December 13, 2018 – Olle Johansson, associate professor / retired from the Karolinska Institute, Stockholm, Sweden, and the Royal Institute of Technology, Stockholm, Sweden – Letter of Concern, addressed to the decision-makers of the City of Brussels

May 15, 2019- Magda Havas, BSc, PhD, Trent University, Peterborough, Canada Affidavit on 5G to Canadian Parliament with nonprofit EMF OFF.

2019 Letters to the Government of Guernsey

Letter from Dr. Alvaro Augusto de Salles to Mrs. Andrea Dudley-Owen, VP of Health and Social Security, The States of Guernsey, Re: 5G

Letter from Dr. Sharon Goldburg to Mrs. Heidi Soulsby & Mrs. Andrea Dudley-Owen, President of Health & Social Care & Vice President, The States of Guernsey, Re: 5G

Letter from Don Maisch PhD to Chairman Michael O'Higgins Chief Minister Gavin St Pier, The States of Guernsey, Re: 5g

Letter from David O. Carpenter, MD to Charles Parkinson Esq President of Economic Development Committee, The States of Guernsey, Re: 5G

Letter from Devra Davis PhD, MPH, to Chairman Michael O'Higgins Chief Minister Gavin St Pier, The States of Guernsey, Re: 5G

Letter from Dr. Christos D. Georgiou, Ph.D. to Charles Parkinson Esq/Deputies of Guernsey President Committee of Economic Development the States of Guernsey, Re: 5G

Letter from EMF 249 Scientists to Mr. Charles Parkinson/Mrs. Andrea Dudley-Owen President & Vice President of Economic Development, The States of Guernsey, Re: 5G

Letter from Jerry L. Phillips Ph.D. to Mr. Charles Parkinson & Mrs. A Dudley-Owen President & Vice President of Economic Development, The States of Guernsey, Re: 5G

--https://ehtrust.org/small-cells-mini-cell-towers-health-letters-scientists-health-risk-5g/

Letter: The CV Crisis in Canada Coincides with the 5G Tower Activations in Vancouver

Dear Leaders: The CV Crisis in Canada Coincides with the 5G tower activations in Vancouver, Toronto, Montreal, and Ottawa last month (Not to

mention 5G on cargo ships and cruise ships.). The stats are available to everyone to show that is where most of the victims are, and will be, by far. This is no incredible coincidence; it is common knowledge. 5G energy is perhaps "the contributing factor" in weakening those already weak (causing respiratory problems and, in many cases, even neurological problems!) allowing the spread of a disease that may kill someone you know, someone you love. Since no studies show that 5G is safe, you must see the wisdom of temporarily shutting down all these commercial towers immediately to establish, beyond reasonable doubt, if this is our co-killer or not. If it is our co-killer then, by God, close the switch now and save yourself too. After all, isn't life worth more than prestige and power? -Sylvain Henry

P.S. If these words do not convince you, then perhaps an amazingly simple experiment will. Just turn 5G off for a week.

Forget 5G: Soon DARPA Skynet Will Rule Our Airwaves

In the 1984 sci-fi film "The Terminator," starring Arnold Schwarzenegger, Skynet was the military's fictional artificial intelligence (AI) program that became self-aware and decided to exterminate humanity. Because of reasons.

Back here in the real world, the US military is dabbling in AI, but not necessarily the killer-robot variety. Instead, the Pentagon's Defense Advanced Research Projects Agency (DARPA) is looking at how AI could better manage wireless communications.

DARPA's goal is to create a wireless network that can transmit enormous amounts of data while concurrently dodging interference from a wide variety of sources -- the agency is looking at technology that could ultimately make 5G obsolete. Or at least a lot less important.

What is more: DARPA expects to have something to show for its efforts as early as next week. That's when the agency's three-year "Spectrum

Collaboration Challenge" (SC2) ends. During next week's MWC Los Angeles trade show, DARPA will award a $2 million prize to the team of researchers who creates the best Skynet for spectrum management.

"The main driver for this competition is really in trying to answer the question, 'Can we make a new breed of autonomous radios that are able to dynamically and collaboratively figure out how to share spectrum, moment-by-moment?" explained Paul Tilghman, a DARPA program manager who is overseeing the agency's spectrum challenge.

Fans of wireless transmission technologies know that 5G is, at its most basic level, a really efficient way to transmit data over radio frequency. However, it only works if there's nothing else happening in the spectrum band it's using. That's why Verizon has spent billions of dollars on making sure it has exclusive access to spectrum licenses in bands ranging from AWS to millimeter wave.

But what if Verizon could push 5G into other spectrum bands that it doesn't own? Like, the spectrum that AT&T owns -- or the spectrum that the US government owns? (Or, from the US military's perspective, what if soldiers could still communicate with each other when the enemy is trying to jam their signal?)

That's the core idea behind DARPA's SC2. Since 2016 the agency has been encouraging teams of researchers to figure out how AI might be able to manage wireless communications so that, for example, Verizon's 5G network could operate in the same spectrum band as AT&T's 5G network and not cause any interference.

Survival of The Most Spectrally Efficient

So how does DARPA's spectrum competition work? It puts wireless networks into a specially designed, WWE-style cage match to fight it out. It's called the Colosseum. I'm not joking.

DARPA's Colosseum is currently housed in Laurel, Md., at the Johns Hopkins University Applied Physics Laboratory, but it will be moved to Los Angeles for the SC2 finals next week. It sports 21 server racks and consumes 65 kilowatts, and "can emulate more than 65,000 unique interactions, such as text messages or video streams, between 128 radios at once," Tilghman wrote in IEEE Spectrum. Researchers can tweak it so that it can simulate all kinds of real-world wireless networks and interference challenges. It's the Thunderdome of 5G.

As Tilghman explained, the contestants in DARPA's spectrum challenge have been developing all kinds of different AI programs to manage wireless communications, and they essentially compete with each other inside the Colosseum to see who can transmit the most data the fastest.

In that regard, the competition takes the unique spectrum-sharing technology developed for the 3.5GHz CBRS band and puts it into overdrive.

Finding Skynet

Ten teams are competing in DARPA's SC2 finals next week. The first, second and third place winners will walk away with $2 million, $1 million, and $750,000 in prizes, respectively. The teams competing are:

- Andersons – an independent competitor
- Dragon Radio – Drexel University
- Erebus – a team of independent researchers
- GatorWings – University of Florida
- How Make Radio – Agitator LLC
- MarmotE – Vanderbilt University
- SCATTER – IDLab, an imec research group at Ghent University and University of Antwerp, and Rutgers University

- Sodium-24 – an independent competitor
- Sprite – Northeastern University
- Zylinium – a team of independent researchers

Already some competitors are hyping the event.

"Last year… we only would award prizes to teams that demonstrated that their radio system could figure out how to use the spectrum better than today's status quo, which is a static set of allocations," Tilghman said. "The question now is really; how good can they do? Honestly, we don't know that answer yet. That's why we have a huge championship event. It's going to showcase what the future of autonomy in the wireless world really holds."

-- https://www.lightreading.com/mobile/5g/forget-5g-soon-skynet-will-rule-our-airwaves/a/d-id/754910

Princess 5G Medallion Class Cruise Ships

Here is what Princess Cruises says about their new 5G Network which was used on the ship that rerouted hundreds of deaths, claimed to be from C 19:

“Princess Cruises, a brand of the Carnival Corporation, will become the first global cruise ship fleet with early access to SES‘s O3b mPOWER 5G network, offered for its Princess Medallion Class, the company announced Monday. The company says that Princess Medallion Class will be fully active on 11 ships by the end of 2020, with a new ship activated every 60 days.

Carnival Corporation’s Global Experience and Innovation unit is giving SES status as its Premier Innovation Partner through 2023, with SES as a fully-integrated development partner of unit spanning design, creation and delivery for connected guest experience innovations, technical platform development, intelligence, and hybrid cloud and edge compute enablement. The SES brand will also be incorporated into the Ocean Medallion.

Princess said that 5G O3b mPOWER will ensure that its Medallion Class Ships are not constrained by traditional bandwidth capacity plans. SES will keep bandwidth ahead of demand with multi-Gbps capacity whenever and wherever needed. To date, SES and Princess have collaborated on WiFi at sea MedallionNet, which has been available to the Princess feet since 2017.

"The future is now with real solutions and proven technology delivering real experiences to floating smart cities around the globe powering a C 19eted experience. SES integration into the Global Experience and Innovation team not only provides world-leading connectivity technology and fueling Ocean Medallion capabilities, but most importantly provides expertise that is passionate about creating amazing experiences through the fusion of creativity, story, connectivity and media across the world," said John Padgett, chief experience and innovation officer for Carnival Corporation. "Our first joint creation, MedallionNet, has significantly elevated the cruise experience for our guests and crew, but more importantly stimulated the creation of leading-edge, cloud-based edge compute models that were previously considered impossible."

--https://www.carnivalcorporation.com/news-releases/news-release-details/four-additional-carnival-corporation-north-american-brands

Radiation Pneumonitis and 5G Armed Diamond Princess Cruise Ships

Radiation Pneumonitis is inflammation of the lung caused by radiation therapy to the chest. It most commonly develops 1 to 3 months after treatment is over, but it can happen up to 6 months after treatment. Chronic pneumonitis can lead to permanent scarring of the lungs (called pulmonary fibrosis).

The Diamond Princess Cruise Ships gave each passenger a 5G MedallionNet wearable device. As an added gift, you will get "radiation pneumonitis", re-named C 19.

A 5G Digitized Nano Smart Dust World

The Chinese were all given mandatory vaccines last fall. The vaccine contained replicating, DIGITIZED (controllable) RNA which is activated by 60Ghz mm 5G waves that were just turned on in Wuhan (as well as all other Countries using 60Ghz 5G) with the "smart dust" that everyone on the globe has been inhaling through chemtrails. That's why when they say someone is "cured" the "virus" can be "digitally" reactivated at any time and the person can literally drop dead.

The Diamond Princess Cruise ship was SPECIFICALLY equipped with 60Ghz 5G. It's basically remote assassination. Americans are currently breathing in this "smart" dust through chemtrails. Think of it like this: add the combination of vaccines, chemtrails (smart dust) and 5G and your body becomes internally digitized and can be remotely controlled.

A person's organ functions can be stopped remotely if one is deemed non-compliant.

Wuhan was a test run for ID2020. (Research mandatory chipped drivers licenses and ID by October 2020).

The elite call this 60Ghz mm 5G wave the "V" wave (Virus) to mock us.

--Steven Molina

Viruses May Simply be the Exosome System Absorbing and Clearing Out Foreign Insults to the Immune System

People are allegedly arriving at hospitals with 'symptoms' of CV which actually looks like cellular poisoning, radiation pneumonitis damage, oxygen

deprivation, Hypoxia, Thrombosis (blood clotting), and stroke, none of which are related to CV.

A "virus" is something that is formed inside the body under certain immuno-stress conditions to fight certain 'ill' 'affected' cells. Viruses are NOT alive. They are exempt of things essential for life. They contain no nucleus and no other part of a living cell organism. They are not going to attack you via an airborne Kamikaze attack. A virus is a collection of genetic material (DNA or RNA) inside a protein shell, and are rendered impotent and as soon as they hit the air, with no way to enter your body unless they are intravenously injected into your blood.

The body just creates more viruses to fight off x, y, z. Viruses act like Exosomes to clean up bacterial wastes, etc… in the intracellular region of your immune system.

If you are wondering why people are getting ill on the Princess Cruise Ships, then look into the 5G network systems they are using. If you radiate the human body enough, the Exosomes will detect a foreign invader and start proliferating to clear out the damage. This can cause a Cytokine Storm.

Cytokine Storm

A severe immune reaction in which the body releases too many cytokines into the blood too quickly. Cytokines play an important role in normal immune responses but having a large amount of them released in the body all at once can be harmful. A cytokine storm can occur as a result of an infection, autoimmune condition, or other disease. It may also occur after treatment with some types of immunotherapy. Signs and symptoms include high fever, inflammation (redness and swelling), and severe fatigue and nausea. Sometimes, a cytokine storm may be severe, or life threatening and lead to multiple organ failure.

Also called hyper-cytokinemia.

Passport to The Brave New World: The Vaccine

If you don't know what freedom is, better figure it out now

I have already written about the currency reset and other features of a technocratic future waiting in the wings. ---New levels of visible surveillance, social credit scores, universal guaranteed income, Internet of Things, energy-use quotas, smart cities.

Events can move in several directions, going forward. In this article, I explore one of those directions.

The occasion is this fake pandemic; the big hammer is the vaccine against the phony C 19ID.

As Fauci mentioned a couple of months ago, it could be a DNA vaccine---new technology---which means it is really gene therapy. Synthesized genes are injected into the body. They purportedly set up immunity. Actually, they PERMANENTLY alter the genetic makeup of the recipient.

As you can imagine, this creates the opportunity to put many different genes into humans. To try to invent "new humans."

The so-called immunity certificates Fauci is now talking about? They would be issued to people who test positive on the new antibody tests for C 19---which is an interesting turnaround, because, since 1984, positive tests results have generally been taken to mean "infected." Why the shift?

Because there is a need for these immunity certificates---as an INTRO to condition the population to an IDEA.

If and when the C 19ID vaccine arrives, the certificates would be used to signify immunity for all those who take the shot.

It would function as a license. Your passport into the Brave New World. You're "immune," so you're allowed to move out of fear mode. And circulate and travel and enter schools...

For DNA vaccines, the reference is the New York Times, 3/15/15, "Protection Without a Vaccine." It describes the frontier of research. Here are key quotes that illustrate the use of synthetic genes to "protect against disease," while changing the genetic makeup of humans. This is not science fiction:

"By delivering synthetic genes into the muscles of the [experimental] monkeys, the scientists are essentially re-engineering the animals to resist disease."

"'The sky's the limit,' said Michael Farzan, an immunologist at Scripps and lead author of the new study."

"The first human trial based on this strategy - called immunoprophylaxis by gene transfer, or I.G.T. - is underway, and several new ones are planned." [That was five years ago.]

"I.G.T. is altogether different from traditional vaccination. It is instead a form of gene therapy. Scientists isolate the genes that produce powerful antibodies against certain diseases and then synthesize artificial versions. The genes are placed into viruses and injected into human tissue, usually muscle."

Here is the punchline: "The viruses invade human cells with their DNA payloads, and the synthetic gene is incorporated into the recipient's own DNA. If all goes well, the new genes instruct the cells to begin manufacturing powerful antibodies."

Read that again: "the synthetic gene is incorporated into the recipient's own DNA."

Alteration of the human genetic makeup.

Not just a "visit." Permanent residence.

The Times article taps Dr. David Baltimore for an opinion:

"Still, Dr. Baltimore says that he envisions that some people might be leery of a vaccination strategy that means altering their own DNA, even if it prevents a potentially fatal disease."

Yes, some people might be leery. If they have two or three working brain cells.

This is genetic roulette with a loaded gun.

And the further implications are clear. Vaccines can be used as a C 19er for the injections of any and all genes, whose actual purpose is unannounced.

The vaccine masters have a problem. They know their genetic technology is far from perfect. Plans to re-engineer the human race are not a simple one two three.

For example, consider the latest and greatest genetic tool, called CRISPR.

Here is a backgrounder I wrote a year ago.

New CRISPR gene-editing: the extreme dangers

Technologynetworks.com (6/26/17): "CRISPR gene editing is taking biomedical research by storm. Providing the ultimate toolbox for genetic manipulation, many new applications for this technology are now being investigated and established. CRISPR systems are already delivering superior genetic models for fundamental disease research, drug screening and therapy development, rapid diagnostics, in vivo editing and correction of heritable conditions and now the first human CRISPR clinical trials."

All hail.

It's called CRISPR, a much faster, more precise, and cheaper technique for editing genes. Researchers are in love with it. You can find hundreds of articles and studies fawning over the innovation.

At phys.org, however, we have this, ahem, warning note (5/29/17): "...a new study published in Nature Methods has found that the gene-editing technology can introduce hundreds of unintended mutations into the genome."

"In the new study, the researchers sequenced the entire genome of mice that had undergone CRISPR gene editing in the team's previous study and looked for all mutations, including those that only altered a single nucleotide."

"The researchers determined that CRISPR had successfully corrected a gene that causes blindness, but Kellie Schaefer, a PhD student in the lab of Vinit Mahajan, MD, PhD, associate professor of ophthalmology at Stanford University, and co-author of the study, found that the genomes of two independent gene therapy recipients [mice] had sustained more than 1500 single-nucleotide mutations and more than 100 larger [gene] deletions and insertions. none of these DNA mutations were predicted by computer algorithms that are widely used by researchers to look for off-target effects." (emphasis is mine.)

"'Researchers who aren't using whole genome sequencing to find off-target effects may be missing potentially important mutations,' Dr. Tsang says. 'Even a single nucleotide change can have a huge impact'."

Genetic roulette is alive and well.

Spin the wheel, see what numbers come up. Good effects, bad effects, who knows? Step right up and take your chances.

Of course, researchers who admit these tremendous problems remain optimistic. They look forward to "refining the method." That's a C 19er for: "we really don't know what we're doing right now."

Unfortunately, much science operates in this fashion. Launch a new technology and turn a blind eye to the consequences. For example, place mercury, a devastating neurotoxin, in vaccines. What harm could result---aside from the destruction of children's brains.

Here is more gushing PR, otherwise known as throwing stuff at the wall and seeing what sticks: "There are weekly press releases and updates on new advances [in CRISPR] and disC 19eries made possible with this technology; the first evidence is now emerging that CRISPR-Cas9 could provide cures for major diseases including cancers and devastating human viruses such as HIV-1." (technologynetworks.com)

The train has left the station.

And just in case you think only the most careful and competent leading lights of the genetic research community would be permitted to get within a mile of CRISPR, here is more from technologynetworks.com:

"CRISPR-Cas9 systems, tools and basic methodology are very accessible as ready to go toolkits that anyone with lab space and an idea can pick up and start working with...In response to a growing need, companies such as Desktop Genetics have developed open access software to accelerate CRISPR experimentation and analysis."

That's good to know. "Anyone with lab space and an idea" can jump on board and have at it.

Do your own cross breeding of the pregnant phrases, "What could possibly go wrong," and "Nothing to see here, move along," and you've summarized the situation.

"They say they cured my anemia, but now I turn green and purple and I keep falling down."

If all this isn't enough to make you see the dangers of CRISPR, consider this statement about engineering human immune cells (T-cells) in a "safer" way. From statenews.com (June 23, 2013):

"The experiment would alter the immune system's T cells only after they're removed from a patient. That gives scientists the chance to screen the CRISPR'd cells to make sure only the three intended genes, all involved in making T cells find and destroy tumor cells, are altered. But after those T cells are infused back into a patient to fight melanoma, sarcoma, or myeloma, the CRISPR system can keep editing DNA, and tracking such edits becomes like following a polar bear in a snowstorm."

Not very comforting. Once set in motion, even under the most protected and limited conditions, CRISPR can keep on working, scrambling genes in unknown ways.

So, when it comes to DNA vaccines, aka gene therapy, a plan to precisely re-engineer humans could quite easily descend into uncontrolled chaos.

And the controllers and elite funders of the vaccine know that.

What to do?

With the global population as their guinea pigs, perhaps they would start small. Introduce the slightest possible gene-alteration, stand back, and see what happens. Try out a gene that would ordinarily---hopefully---achieve next to nothing. Try to measure the results.

Viewed from one angle, the whole fake epidemic is a set-up for the vaccine, and for mandatory vaccines.

I have written about the special exemption from liability recently issued by the US Dept. of Health and Human Services. Basically, anyone associated with pharmaceutical strategies undertaken "against the CV" cannot be sued, regardless of "adverse effects" of medicines or vaccines.

Taking a stand against mandatory vaccines---any and all vaccines---is more important than ever.

--https://marketplace.mybigcommerce.com/the-matrix-revealed

Brighteon Films’ New 5G Mini-Documentary That Warns Humanity About the Imminent Danger of 5G Cell Towers

Part of the benefit of building and owning an independent video platform is that we can post important videos for humanity that would be immediately banned on YouTube, Facebook, Twitter, or Google. That’s because the tech giants are corrupt, anti-human, criminal organizations that censor videos which oppose their own corrupt financial interests.

And every tech giant in America wants 5G to be everywhere since it allows them all to conduct real-time surveillance on the entire population by surreptitiously streaming mobile device audio and video through 5G data streams. The entire point of 5G, flatly stated, is to create the world’s most invasive surveillance network that also doubles as an electromagnetic weapons platform that can target specific individuals with focused beams of cancer-causing radiation.

The dirty truth about 5G is fully exposed in a stunning new mini documentary released by Brighteon Films. Titled, "5G: Next Gen Health Dangers," the 22-minute video is available here:

This mini documentary exposes the health dangers of 5G and why this dangerous technology is a new source of "electromagnetic pollution" that endangers human lives. The tech industry is fully aware of these dangers but pushed 5G anyway, censoring critics of the technology and trying to silence the science that exposes the public health risks associated with this extreme technology.

Unlike 4G and previous technologies, 5G focuses a tight beam of cancer-causing energy at your mobile device, which is usually held right next to your head. The shorter wavelengths used by 5G result in higher energies and higher health risks for all those who are exposed to the beams. More importantly, just walking around a city where 5G is active means your body can pass through a 5G energy beam that's being used by someone else.

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With telecom companies now installing 5G towers every few hundred meters, entire cities are being blanketed with these surveillance-capable beam weapon systems that are devastating human health and causing widespread brain cancer.

5G exposure causes neuropsychiatric effects that alter human personalities and cause brain damage

The evidence of public harm stemming from 5G exposure is so great that even the mainstream science publication Scientific American has openly warned that 5G could devastate public health.

Research published in the peer-reviewed journal Environmental Research shows that 5G exposure causes infertility, cellular DNA damage, spontaneous abortions, and even psychiatric effects in humans (personality changes).

5G exposure also causes the body to generate toxic chemicals in the blood, due to an effect stemming from "Voltage Gated Calcium Channels" (VGCC) where the electromagnetic energy found in 5G beams causes the body to generate toxic substances ("peroxynitrites") that poison the brain and the entire nervous system. As stated in the study linked above:

Produced by elevated levels of peroxynitrite and the free radical breakdown products of peroxynitrite and its C02 adduct. Four studies of EMF exposure, cited in Pall (2013) showed that oxidative stress following exposure was associated with major elevation of 3-nitrotyrosine, a marker of peroxynitrite, thus confirming this interpretation. Two other studies each found 3-nitrotyrosine elevation, both following 35GHz exposures (Sypniewska et al. (2010); Kalns et al., 2000).

That same study also warns of the neuropsychiatric effects of 5G exposure:

Of all cells in the body, the neurons have the highest densities of VGCCs, due in part to the VGCC role and [Ca2+] i role in the release of every neurotransmitter in the nervous system. Calcium signaling regulates synaptic structure and function in 5 different ways, each likely to be involved here. Oxidative stress and apoptosis are both thought to have important roles. Lowered sleep and increased fatigue are likely to involve lowered nocturnal melatonin and increased nocturnal norepinephrine.

--https://www.naturalnews.com/2020-01-03-brighteon-films-new-5g-mini-documentary-imminent-danger-of-5g-cell-towers.html

5G Skynet Causes Worldwide Blackout Revolution (TV series)

A worldwide blackout may be the next phase of this Fake Virus Scamdemic:

The television series, ***Revolution***, is set in a post-apocalyptic near future, in the year 2027. Fifteen years earlier, in the year 2012, a worldwide event known as "The Blackout" caused all electricity on Earth, ranging from computers and electronics to car and jet engines, to be disabled permanently. As a result, trains and cars stopped where they were, ships went dead in the water, and aircraft plummeted from the sky and crashed. In the years after the Blackout, people adapted to this new world without electricity. Because government and public order collapsed, several areas are ruled by militias and their generals.

The series begins with the surviving Matheson family: Ben and his two young adult children: daughter Charlie and son Danny, who now live in a village near Chicago. He wears a small pendant around his neck that is the key to not only finding out what happened fifteen years ago, but also a possible way to reverse its effects. Sebastian Monroe, Monroe Militia general and self-appointed President of the Monroe Republic, whose borders are the Mississippi River and the old states of Kentucky and the Carolinas, is searching for the pendants so he can use their power to take control of the entire North American continent. In the series' pilot, Ben Matheson is killed, and Danny is abducted by Captain Tom Neville of the Militia.

The remaining Matheson family, joined initially by Miles Matheson, Aaron Pittman, and Nora Clayton, now are on the run from the Monroe Militia. Monroe's new benefactor, Randall Flynn, a former U.S. Assistant

Secretary of Defense who fifteen years earlier ordered deployment of the weaponized technology that caused the blackout, now works with Monroe in his efforts after Ben's wife Rachel (working under duress for Monroe) escapes from his custody. This technology is later revealed to be a form of nanotechnology whose ability to drain electricity can be countered by the pendant.

Opening Introduction:

We lived in an electric world. We relied on it for everything. And then the power went out. Everything stopped working. We weren't prepared. Fear and confusion led to panic. The lucky ones made it out of the cities. The government collapsed. Militias took over, controlling the food supply and stocking up on weapons. We still don't know why the power went out. But we're hoping someone will come and light the way.

--

Wikipedia

A.I., Smart Dust, C 19, and Their Relationship to an Interlaced 5G Network: Humans Enmeshed Within the Superstructure of an Electromagnetic Connective Nodal Net

A.I. marks the Transhumanistic Post-Human Era, where the ruling Technocratic elite seek to use any and every high-tech bio and nano technology possible to exterminate humans and replace them with an A.I. superstructure of robotics, nano synthetic forms, and digitally created virtual and holographic mechanisms and realms. From the beginning, the Transhumanistic Post-Human Era was designed to remove humans from the economy and makes them obsolete. It is a Eugenics based system. The C 19 psyop is merely one instrument within that overarching agenda and superstructure to exterminate

the "useless eaters" from the grander General A.I. Smart Dust, bio and nano synthetic, Nodal Electromagnetic Connective Net.

5G Activated Nanotech is C 19

This is scientific research from my recent book, not speculations replete with wild assumptive assertions. I ask you to think scientifically with me, now. Lay your emotions aside. My research, which I have exhaustively presented in my last book, The Invisible Enemy, including peer reviewed medical abstracts and references, suggests that:

5G Activated Nanotech is C 19

Nanotech is used to lock on to 5G and is essentially activated by 5G. Quite possibly, the nano tech delivery system is Chemtrails, as well as Vaccinations. Correspondingly, the ventilator calibrations we are seeing used with alleged C 19 patients are concurrent with what we see used with Acute Hypoxemic Respiratory Failure and NOT CV related Pneumonia or Influenza. In other words, 5G EMF driven Hypoxia related Thrombosis, leading to Acute Hypoxemic Respiratory Failure, is actually what we are seeing in alleged C 19 patients, which is immune system related and not virally contagious.

5G Disruption of the Bond Angle of Oxygen Molecule Electrons and Hypoxia related Thrombosis:

Another form of electromagnetic radiation is Wi-Fi. Wi-Fi driven cellphones have been proven to be unhealthy, long term, in countless scientific papers on the long-term effects of electromagnetic radiation and the human immune system. What about the 5G network? Obviously, 5G is a form of EMF but a quite different form, using different frequencies and energies than its more amicable predecessors, 2G, 3G, and 4G. 5G does not have a long range and is blocked by physical objects.

5G needs to be boosted at regular distances and is known to interfere with oxygen molecules in the water inside the human body. 5G interferes with

the bond angle of oxygen molecules in water. The one lone electron exerts a less repulsion than normal on the two bonding oxygen atoms, so they can spread out more to a 134 degrees bond angle from the ideal of 120 degrees. All oxygen atoms have an octet of electrons.

In stands to reason that any deformation of bond angle or electron sharing of molecules could interfere with hemoglobin transport. Just imagine what it could do at the atomic level of a person's hemoglobin transport system. It could literally suffocate a person by depriving their lungs of precious oxygen molecules through excessive ***Oxidative Stress**.

Oxidative Stress contributes to many pathological conditions and diseases, including cancer, neurological disorders, atherosclerosis, hypertension, ischemia/perfusion, diabetes, acute respiratory distress syndrome, idiopathic pulmonary fibrosis, chronic obstructive pulmonary disease, and asthma.

China launched the world's largest 5G network in October 2019. Some researchers into the relationship between 5G and Immunology have put forth the claim that 5G damages the immune system, leaving affected individuals highly exposed to the disease. They allege that 5G mobile networks are being deployed in high frequency bands of up to 60 GHz, thus causing ionization of the oxygen molecules in the air. This process potentially splits the molecular electron bonds which then deprives the human body of oxygen, causing Hypoxia related Thrombosis, stroke, and death if prolonged.

Acute Hypoxemic Respiratory Failure:

Acute hypoxemic respiratory failure is severe arterial hypoxemia that is refractory to supplemental oxygen. It is caused by intrapulmonary shunting of blood resulting from airspace filling or collapse (e.g., pulmonary edema due to left ventricular failure, acute respiratory distress syndrome) or by intracardiac shunting of blood from the right- to left-sided circulation. Findings include dyspnea and tachypnea. Diagnosis is by arterial blood gas measurement and chest x-ray. Treatment usually requires mechanical ventilation.

Correspondingly, the ventilator calibrations we are seeing used with alleged C 19 patients are concurrent with what we see used with Acute

Hypoxemic Respiratory Failure and NOT CV related Pneumonia or Influenza. In other words, 5G EMF driven Hypoxia related Thrombosis, leading to Acute Hypoxemic Respiratory Failure, is actually what we are seeing in alleged C 19 patients.

The 5G Internet of Things and Smart Dust: The Future of Wireless Network Sensors

Abstract

This Paper reviews the key elements of the emergent technology of "Smart Dust" and outlines the research challenges they present to the mobile networking and systems community, which must provide coherent connectivity to large numbers of mobile network nodes co-located within a small volume. This has enabled very compact, autonomous, and mobile nodes, each containing one or more sensors, computation and communication capabilities, and a power supply. Large-scale networks of wireless sensors are becoming increasingly tractable. Advances in hardware technology and engineering design have led to dramatic reductions in size, power consumption and cost for digital circuitry, wireless communications, and Micro Electromechanical Systems (MEMS). The missing ingredient is the networking and applications layers needed to harness this revolutionary capability into a complete system. The main aim of this study was to explore the application of Internet of Things and smart dust in Academic Institution.

Introduction

The Internet of things is a system of interrelated, internetworking smart devices or physical devices which are connected to the internet and are embedded with electronics, software, sensors, and actuators that enable these objects to collect and exchange data. An IoT device can be a computing device, mechanical or digital machine, an object, animal, or human that is provided

with a unique identifier and has the ability to transfer data over a network without requiring human-to-human or human-to-computer interaction. For example, thing, in the Internet of Things, can be a human with an implant to monitor heart, any animal with a transponder chip to track its location and more parameters in real-time, a vehicle with sensors that alerts the driver when tire pressure is low or any other natural or man-made artificial object that can be assigned an identifiable address i.e. IP address and has been devised with the ability to transfer data over a network.

The term "smart dust" originally referred to miniature wireless semiconductor devices made using fabrication techniques derived from the microelectronics industry. These devices incorporate sensing, computing, and communications in a centimeter sized package. This article discusses the construction of much smaller silicon-based systems, using the tools of nanotechnology. The synthesis of millimeter-to-micron-sized functional photonic crystals made from porous silicon is described. It is shown how the various optical, chemical, and mechanical properties can be harnessed to perform sensing, signal processing, communication, and motive functions.

The smart dust concept was introduced by Kristofer S. J. Pister (University of California) in 2001, though the same ideas existed in science fiction before then. Stanislav Lem had introduced that kind of possibility in his book The Invincible, 1964. Imagine a cloud of sensors, each the size of a grain of sand, blown in the air and gather different kind of data on the sky to weather stations. Or picture tiny robotic chips drifting through a human artery to locate, and erase, a hidden blood clot.

Conclusion

Internet of things (IoT) is an emerging field which has improved the quality of human life. The functionalities provided by IoT save time, energy, and cost of processing by providing accurate real-time data enabling timely decision making. This paper presents an overview of the Internet of Things (IoT) concept, its benefits, driving factors; challenges faced by IoT and finally highlighted the security concern with respect to Indian context. The Indian Cyber Security currently lacks the infrastructure to mount defensive and

offensive operations against cyber-attacks. It is currently engaged in tackling localized cyber-crime on a case-by-case basis. With the ever-increasing number of entities getting connected to the internet and the rise in cybercrimes, maintaining the security of the devices, data, and users of IoT becomes of paramount importance. Dust is usually a nuisance. But "smart dust" could revolutionize how we monitor and understand the world around us. Smart dust is an ongoing research project whose main objective is to design a cubic micrometer-scale sensing node capable of bidirectional communication. The applications of miniature distributed sensor networks are numerous. Smart dust has four major components: power, computation, sensors, and communication. With these four components, a number of smart dust systems can be designed and modified depending on the applications.

Smart dust is a completely new paradigm for distributed sensing, and it is opening up a fascinating new way to look at computers. If the smart dust networks successfully emerge, the line between reality and fiction would be blurred.

--Muhammad Mannir Ahmad Getso Masters in Computer Systems Engineering University of East London and Mohamed Ismail Z. Senior Lecturer, SOECS FTMS College Cyber Jaya, Malaysia

Weaponized A.I. and Nano Tech

Bill Gates' Chemtrails Delivery Mechanism for Nanotech

Bill Gates Says Chemtrails Are Good for Us?????

Chemtrails are the best delivery system, in addition to Vaccinations, for the Technocratic Elite to administer their 5G lock-on, nano tech into the environment to make the entire

world into their A.I. Internet of Things…nano tech in the air we breathe, nano tech in the water we drink, nano tech in the Earth we till, nano tech in our very blood stream. It is 5G driven nano tech grid of total control.

And now it finally comes out…Bill Gates has a bold new strategy to save the world: **Chemtrails.**

Air pollution has a new patron saint. The founder of Microsoft himself wants to fill the skies with sulfate particles released from "specially designed" aircraft flying in programmed patterns in the upper atmosphere.

The purported goal: to reflect sunlight back into space, thus cooling the planet. It might look something like this:

The "tinfoil hat brigade" of chemtrail conspiracy theorists must feel an odd mixture of vindication and confusion. The very thing they have suspected for so long is now being touted as a cure for, of all things, global warming.

Who Elected You?

Let's pause a moment to consider why this story, originally reported in 2019 on the Gates network, MSN.com, has resurfaced.

Gates is under increased scrutiny since he decided to use his vast influence and wealth to fight the use of chloroquine and hydroxychloroquine as treatments for the new CV. As CDMedia has reported repeatedly, the drugs, in concert with azithromycin and zinc, defeat the virus at the RNA level by passing zinc through the cellular membrane. The tried, true and inexpensive drugs thwart the ability of pharmaceutical labs to profit from the current outbreak.

6200 doctors in 30 nations are touting the efficacy of Hydroxychloroquine in treating C 19.

Fauci continues to downplay and stall while his benefactor Bill Gates builds vaccine plants.

Meanwhile, multiple countries announce:

- Italy: hydroxychloroquine works!
- France: hydroxychloroquine works!
- Spain: hydroxychloroquine works!
- Brazil: hydroxychloroquine works!

Dr. Fauci: there's no strong evidence it works. No strong evidence? There's the evidence of the entire world's medical community.

Gates is of course a major investor in new, expensive, potential vaccines. He also wants everyone to get vaccinated with one of his traceable vaccines, going so far as to say that mass gatherings such as concerts, church services, and sporting events may not happen until everyone has been vaccinated.

Nobody can have fun until we consent to pay for a Gates-funded vaccine? Say what you will about his messiah complex, he's a heck of a salesman.

Now, back to chemtrails (another line I never thought I'd write). The reason reporters, alt media, and citizen journalists are digging up stories on Gates: no one trusts him. Once perceived as a cutthroat businessman, Gates has recast his image over the past two decades as a force for positive change.

Pictures with his wife Melinda tending to sick children in Africa: this is Gates 2.0, a man–and his wife, how sweet!–doing their part for the less fortunate. Nothing else to see here.

In the meantime, Gates has been meeting with heads of state, currying favor with the World Health Organization (WHO) and the G20. Worth more than $100 billion, he is, as I have said before, his own country.

Gates is driven by a frightening agenda, but it's not visible on the surface. The scholarship behind population reduction as a global benefit is unimpeachable. Over a billion people in both China and India? That's not healthy. Global population growing steadily? No one wants that. But to treat people as mere data points is dehumanizing and leads to poor policy decisions.

If left to unethical ideologues, could a virus be used to intentionally lower global population? A "greater good" proposition? Purely theoretically, of course.

When it comes to climate change, the Gates plan is similarly wild. The intention is to create a "Pinatubo effect," named after the 1991 volcano in the Philippines which released thousands of metric tons of ash into the upper atmosphere, thereby creating a short-term cooling effect.

From the ridiculous Microsoft-produced article:

The researchers believe that a fleet of specially designed aircraft could spray sulfate particles into the lower stratosphere to cool down our planet and offset the effects of climate change.

A test of the technology has been proposed for this year, the Daily Mail reports, with the Stratospheric Controlled Perturbation Experiment (SCoPEx) seeing a bag of carbonate dust released into the atmosphere 12 miles up.

If that experiment proves successful, the researchers will move on to releasing the dust from planes.

The researchers suggest that jets flying 12 miles up would complete over 60,000 missions in 15 years, starting with a fleet of eight and moving up to 100 planes.

At present, there are no aircraft capable of doing this, so they would need to be developed.

To paraphrase: no one has ever done this before, but we know exactly how to do it.

Oh. Okay.

All of a sudden, the chemtrail crowd seems prescient, not cuckoo. Like many "conspiracy theories" before it, it's not outlandish anymore. No. It turns out to be a plan (never implemented before, mind you) conceived by globalist technocrats.

Not everyone agrees that the plan would work. Pat Mooney, Executive Director of the ETC Group, a Canadian environmental protection firm, states that spraying sulfates into the upper atmosphere could backfire.

'It will do nothing to decrease levels of greenhouse gases in the atmosphere or halt ocean acidification. And solar geo-engineering is likely to increase the risk of climate-related international conflict, given that the modeling to date shows it poses greater risks to the global south.

Sounds like another case of the cure being worse than the disease.

https://creativedestructionmedia.com/analysis/2020/04/06/do-you-trust-this-man-bill-gates-says-chemtrails-are-good-for-us/?fbclid=IwAR3ppFp4oWlM9a1osc1GdaTamr2cPjVx8idVsbWSm9T6Rp9w3IXd1AmzGS0

5G Activated Nanotech is C 19

Whenever I use the term, "C 19", I mean 5G EMF Radiation, which when coupled with Metallurgical Chemtrail pollution, creates Radiation Sickness by over stressing the human body's respiratory system, creating oxidative stress, and provoking the body's natural immune system to over manufacture secretions of exosomes (viruses) to protect itself.

Nanotech is used to lock on to 5G and is essentially activated by 5G. Quite possibly, the nano tech delivery system is Chemtrails, as well as Vaccinations.

Lawsuit: Google, Facebook, Neuralink Sued for Weaponized A.I. Tech Transfer, Complicity to Genocide in China and Endangering Humanity with Misuse of A.I.

1) Google
2) Deepmind
3) Alphabet
4) Facebook
5) Tesla
6) Neuralink
7) Sergey Brin
8) Larry Page
9) Mark Zuckerberg
10) Elon Musk,
11) Sandar Pichai
12) PR Newswire and
13) John Does

This is the most significant and important lawsuit of the 21st century, and it impacts the entire world. CEO's and Founders Mark Zuckerberg, Elon Musk, Sergey Brin, Larry Page and Sandar Pichai are also named as defendants along with their companies.

Case Summary Facts

Endangering Humanity with the misuse of Artificial Intelligence, Complicity and Aiding in Physical Genocide inside of China by transferring AI Technology, Engaging in Cultural Genocide of Humanity, & Controlling and programming the Human Race by Social Engineering via AI coding and AI algorithmic biometric manipulation

This is phase 1 of first lawsuit. We are open for support at a global level. We have a network of thousands around the world and tens of thousands in China, who are witnesses and have been harmed in China from the defendant's

technology and data transfer. The following are Federal Case Compliant Summary Facts Extracted from the official document filed in San Diego, California. To find out details of financial, personal, and corrective behavioral demands, you may access the case in the federal court data base.

1. Endangering and Threatening all of the world's citizens, and humanity by misusing and weaponizing Artificial Intelligence, Quantum Computing, Robotics, 5G, Machines, Smart Phones, Smart Homes, Smart Cities, IoT's, Holograms, Mixed Reality, Nano-Technology, Cloning, Gen-Editing, Cybernetics, Bio-Engineering, and the creation of a digital AI Brain linked to Google's Search engine with the use and extraction of humanities bio-Metrics data, digital bio-metric codes including facial, voice, health, organ, neural network and body recognition technology. Thus, controlling humanities thoughts, actions, biology, biometrics, brain neural pathways, the human bodies neural networks that reprograms all human beings through social engineering and bio-digital social programming, without their consent, knowledge, understanding, or free will. Extracting humanities digital footprints in breach of the Nuremberg Laws, FTC Act (15 U.S.C. §§ 41–58 and Engaging in irresponsible and unsafe Research and development of Artificial General Intelligence or Artificial Super Intelligence that could enslave or kill off humanity or give the power to the defendants to enslave humanity in numerous ways on the 5G and other developing networks.

2. Negligence and Complicity in Persecution and Genocide of millions in China, per Article's 1, 2, 3 and 4 of the Genocide Convention, and 18 U.S.C.A. § 1091§ 1091. Genocide, not limited to Democracy Activists, Falun Dafa Practitioners, Christians, Uyghurs, Tibetans, Journalists, Judges, Lawyers, and Academics inside of China.

3. Transferring and Providing to China, China's Government and its Companies, knowledge, data, capabilities and technology to weaponize Artificial Intelligence, Quantum Computing, Machines, Robotics, 5G, Bio-Metrics, Cybernetics, Bio-Engineering, IoT's, Computer Vision, and Human Tracking Technology, and technology that can give China access to Artificial

General Intelligence or Artificial Super Intelligence, that endangers the world, and all of humanity, including AI weaponry for assassination.

In violation of Breach of Arms Control and Disarmament Act [22 U.S.C. 2551 and Foreign Assistance Act of 1961, as amended [22 U.S.C. 2151, 22 U.S. Code § 2752.Coordination with foreign policy, 22 U.S. Code § 2753. Eligibility for defense services or defense articles, 22 U.S. Code § 2754. Purposes for which military sales or leases by the United States are authorized; report to Congress, Arms Control and Disarmament Act of 1961, 22 U.S.C. § 2551, Atomic Energy Act of 1954, 42 U.S.C. §§ 2011-2021, 2022-2286i, 2296a-2297h-13,

4. Providing to China and Chinese Companies, AI, Health Data and Bio-Metric Technology used for surveillance, tracking, hunting, quarantine, capture, arrest, torture, concentration camps, organ harvesting, and organ trafficking that contributed to the death of Chinese Citizens, including Falun Dafa Practitioners, Uyghurs, Democracy activists, Christians, Tibetans, judicial representatives, professors, journalists, and minority groups, not limited to any gender, race, political affiliation, faith, or persons residing in China. Same violation of fact numbers 2 and 3.

5. Providing to China's government, their corporations and nefarious entities, Facial Recognition, Voice Recognition, Body Detection, Skeleton Detection, Vital Organ Recognition, Emotion detection, Skin and Health Biometric and other AI technology that led to persecution, torture, organ harvesting, death and cremation of human beings in China, not limited to Uighur, Falun Dafa, Christian, Tibetan, Democracy activists, judges, attorneys, common citizens and other minority groups. Endangering the world by Weaponizing China's AI Capabilities that is be laid on the (BRI) One Belt One Road linking Asia, Middle East, Africa, and Europe, endangering all of humanity. Same violations of facts number 1, 2 and 3.

6. Misrepresenting to the world and deceiving the U.S on Google's activities in China and their technology transfers that contributed to China's Quantum AI

advancements, surveillance, abuse, torture, concentration camps and murder of its own citizens. Same violations of facts number 1, 2 and 3.

7. Providing health, bio-metric, financial and social network data of Americans, and the world citizenry that is in the hands of the Chinese government, endangering the world and all its peoples on the 5G network.

8. Creating an interconnected platform between Facebook, Google, Alphabet, all entities under Neuralink, and DeepMind that allows for a digital brain to connect to the internet, all digital and bio-digital networks, human bodies, machines, robotics, IoT's, Augmented Reality, Virtual Reality, Mixed Reality, Holograms and other technologies, that can be used for surveillance, to track, manipulate, control, social engineer, re-engineer, reprogram, brain wash, hunt, quarantine, threaten, arrest, commit cultural genocide, and kill human beings by machines, Bio-Digital AI, Digital AI, and robotics connected to the 5G, 6G and other networks and corporate command centers

9. Creating platforms that is on the verge of developing Artificial General Intelligence and the Subsequent Super Intelligence that will be beyond the control of the human beings working at Neuralink, Alphabet, DeepMind, Google, Facebook, or governments.

10. In violation of Article 1, 2, 3 and 4 of the Genocide Convention for weaponizing China's Artificial Intelligence, Facial, Voice and Other Bio-Metric technology that were used on Chinese citizens. Not to exclude genetic experimentation of human beings in Chinese concentration camps, including hybrid human experiments within the concentration camps.

11. Introducing, planning, promoting and engaging in physical and cultural genocide to humanity by replacing their neural network operating systems with Artificial Intelligence and Machines, merging humans with machines with the interconnection of the internet, internal tech experimentation's of defendants and consumer products promoted, provided and transferred by the defendants to the public directly and indirectly.

12. Reprogramming and social engineering humanities thoughts and brain chemistry via AI algorithms in the internet, social media, apps, smart phones,

IoT's, computers, wearable devices, implanted technology, virtual reality, augmented reality, mixed reality, holograms, and alternate reality. Not informing and explaining to humanity that their brain chemistry is altered by a replicating software as they engage with the defendants products and services, nor that their thoughts and actions can be manipulated and controlled by smart phones, apps and IoT in connection with the network platforms, technologies and initiatives Google, Alphabet, Facebook, Neuralink, DeepMind, and Tesla are providing and introducing to the public, in turn giving these tech giants complete control and influence over Americans, and humanity.

13. Weaponizing AI by Utilizing humanities bio-metric and social media data and misusing the technology by Controlling the Human Race and its thoughts through Social Engineering and bio-digital social programming by using people's bio-metric systems through Google and Facebooks eco systems, coding, algorithm unfairness, with the use of social media data, their emotions, weaponization of the internet, smart phones, IoT's and computers, thus controlling human thoughts, and humanity at a global scale against their free-will and knowledge. Not informing the public that their dependency on smart phones, is due to frequencies and Artificial Intelligence software emitting from the AI systems and devices that is connecting to the neural networks of humans, creating a symbiotic process, making them a cyborg, dependent, reliant, controlled and programmed by the products and services provided by Google, Facebook, Alphabet, Deep Mind, Tesla, and Neuralink. In essence, putting the entire human race in a state of pet and owner relationship, via their biometrics, biology, and digital selves' neural network operating systems. The Owner being the Artificial Narrow Intelligence, other AI forms, provided by the defendant's companies, organizations and personal initiatives within their companies and Machine Software's operating inside the bio-metric systems of human beings.

14. Negligence in Algorithm Fairness that allows hate speech, misinformation and slander to cast doubt on google search engines against people's efforts to notify and inform the world's people that millions have been subject to Organ Trafficking, Organ Harvesting, Concentration Camps, Torture, and Abuse and that the risks of Artificial Intelligence is multi-faceted and enormous.

15. Writing Code and Creating Algorithms that has been and is currently engaging in cultural genocide including introduction of cybernetics, robotics, and creating an ecosystem that allows for Bestiality to exist and be forefront on Google's search engines, affecting societies, and youth's bio-metrics system after viewing the videos and articles via their smart phones and computers, influencing their thoughts through their bio-metric systems, paving the next generation to degenerate and accept this type of behavior with the introduction and experimentation of bio-engineering and cybernetics.

16. Research and Development conducted by **Alphabet, Facebook, Google, DeepMind, Nueralink** and other ventures in Silicon Valley have created algorithms and coding that supports, promotes and achieves brain washing of humanity through social engineering and bio-digital social programming, that endangers the human race in its entirety via the interconnection of their platforms, social media, and technology distributed in physical and digital format to society.

17. Writing Code and Having Algorithms that influenced liberals and conservatives to exponentially increase their hate for each other via their bio-metric systems and emotions while attached to smart phones, IoT's, apps, digital media, Google, Facebook, and other interconnected platforms. Causing harm to the nation and the world, and endangering humanity at the geo-political level with nation state leaders undergoing social engineering and bio-digital social programming and control by their platforms to ignore human rights atrocities in China and around the world stemming from the defendant's algorithm misuse and AI technologies. Implicating world leaders and their citizens to be charged under article 2, 3 and 4 of the genocide conventions. This includes Canadian Prime Minister, the Majority of European Leaders, and the leadership at the United Nation, the media, press, their reporters, and others who have and are still censoring awareness for human rights violations in China or working against it. Writing code and algorithms that controls reporters, media and the press's thoughts and actions beyond the normal manipulation they receive from special interest groups, producers, or friends who may manipulate them, other reporters and their C 19ered content, thus

Weaponizing the media for Google's development against the media's free will and knowledge.

18. Negligence on Google and Facebooks Algorithm unfairness caused liberals and conservatives to conflict and fight each other beyond the reasonable norm, affecting their thoughts and emotions via their bio-metric systems being controlled and enhanced by Artificial Narrow Intelligence systems inside the smart phones and the apps partially formed by bias and hateful content that created division and undue hate among Americans and the people of the world.

19. Division caused by misuse and negligence of Algorithms in Facebook and Google, hindered and delayed the U.S administration's efforts to pressure China in time to save more people from concentration camps, death and cremation, in addition to national security concerns that impacts Americans and the world citizenry. This is not limited to the Trump Administration, rather it affected the Obama, and Bush administrations as well. Google hurt America and China for 2 decades at a geo-political level. Google is guilty of Article 2, 3 and 4 of the genocide conventions, in addition to complicity.

20. Masking posts and articles by The AI Organization, meant to bring awareness to human rights atrocities in China, on Facebooks Platform. Masking Content created by Cyrus A. Parsa meant to save people form dangers pertaining to human rights violations interlinked with Artificial Intelligence. Banning the book "AI, Trump, China & The Weaponization of Robotics with 5G" for advertisement and masking posts of people working on behalf of The AI Organization. Masking posts of "Artificial Intelligence Dangers to Humanity" book, on Facebooks platforms, and masking other posts from The AI Organization written by Cyrus A. Parsa. These posts related to China, Taiwan, Hong Kong, Iran, big tech, Google, 5G, Robotics, Drones, and Bio-Metrics threats to and Enslavement of Humanity. Releasing the Masks recently after coming under pressure and scrutiny. Hiring Chinese who committed espionage and attacked American companies, including The AI Organization and Cyrus A. Parsa, as well as his associates and victims of persecution.

21. Writing Code and Sustaining Algorithms that propagate an extreme amount of pornography, violent pornography, and insinuation of rape and prostitution,

that denigrates females, young girls, altering humanities thoughts and family based concepts of traditional health based ethics via their bio-metric systems, hence, contributing to rape, sex and human trafficking and broken families.

22. Developing Code, Algorithms and Ecosystems that re-programed a generation of people's bio-metric structure, and brain chemistry to be bio-digitally controlled by Google and every other tech industry with similar platforms that operate on varying types of Artificial Intelligence, including Artificial Narrow Intelligence.

23. Developing Code, Algorithm's and Ecosystems that created a secondary digital brain inside the brains of AI Scientists to be subservient, controlled and programmed to create, sustain, promote, and grow Google, Alphabets, Facebooks, and other tech giants' platforms. Elon Musk has also confirmed The AI Organization's findings, that humans can have a secondary digital brain formed via their neural networks.

24. Developing Code, Algorithms and Ecosystems that creates a secondary digital brain inside the brains of all human beings that can prevent the person from recognizing that they are being controlled, and bypassing any biological resistance to AI Control or human bodies innate capability to resist the formation of a symbiotic and parasitical relationships with AI software and cybernetic hardware via their rational thinking structure in their brain.

25. Not informing consumers that part of the defendants goals for AGI (Artificial General Intelligence) and ASP (Artificial Super Intelligence) has religious goals that can be dangerous to all of humanity, including attempts to retrieve or ask AGI about the inner working of the "simulation", what, when, how and by whom the simulation was formed, and what is outside it. Neuralink, Google, Alphabet, Facebook, Tesla, and DeepMind have not registered as a religious institution, yet they are engaging in religion under the umbrella of science. In fact, they have turned their companies, into religious institutions with final aim goals identical to most religions. The defendant and their companies are attempting to treat their Technological developments as God, taking all of humanities bio-metrics, data, and connecting it to their quantum, robotic and machine-based AI technology, and upload their digital

selves into other bodies, networks or machines, mimicking the beliefs of a spirit or soul. In Fact, Elon Musk stated in an interview, that he wants to develop AI to a point, that it could "give him the answers to the simulation". Elon Musk is agreeable to the risks that an AGI or Artificial Super Intelligence can go rogue, kill off humanity, or be hacked, yet as smart as he is, he doesn't understand that the computing technology the AGI and ASI would have, would not go beyond the level of Atoms to observe more microscopic particles at its plane, hence, any answers to his sought questions to simulation is limited, and the endeavor of an AGI or ASI is putting humankind at risk. There is an alternative way to achieve his answers, that is 100%. safe and does not involve giving the power to a machine or Artificial Intelligence.

26. Defendants have created AI systems that can take in humanities facial, voice and other bio-metric information and decode whether they are resistant to AI, subject to its control, atheist or have a faith. This technology can enable AI, or any entity using AI to track, profile, hunt and kill targets it deems resistant to its control or resistant to AI. This can be done with drones, machines, robotics, or poison delivery systems such as Micro-Botic terrorism.

All Charges from 1-26 have led to physical genocide in China spearheaded by the Chinese Communist Government, and all charges from 1-16 are in breach and violations of penal codes stated in facts 1, 2 and 3. All Charges have and are leading to Cultural Genocide in America and around the World, endangering all of humanity to enter a stage of cultural and physical genocide with the interconnection of Artificial Intelligence, 5G, Robotics, Machines, Drones, Smart Cities, as it pertain to negligence and misuse by the main platforms and companies of Google, Facebook, Alphabet, DeepMind, Neuralink, John Does, and their leadership. This does not exclude other players such as Amazon and Microsoft from guilt, and the very many Chinese companies who were trained by these Western companies.

--https://theaiorganization.com/google-facebook-neuralink-sued-for-weaponized-ai-tech-transfer-complicity-to-genocide-in-china-and-endangering-humanity-with-misuse-of-ai/?fbclid=IwAR09GDTvwoS1iwfbxvYCAxH8yJ_XXg7Vdxh4stoK2NXEXpOxDcJ48fNBuIA

C 19 In a Nutshell

Nanotech is the real culprit in Wuhan, China, and elsewhere, activated by 5G.

Adding Nanotechnology to the 5G Respiratory Damage Syndrome

Scientists have identified for the first time a mechanism by which nanoparticles cause lung damage and have demonstrated that it can be combated by blocking the process involved, taking a step toward addressing the growing concerns over the safety of nanotechnology.

Nanotechnology, the science of the extremely tiny (one nanometer is one-billionth of a meter), is an important emerging industry with a projected annual market of around one trillion US dollars by 2015. It involves the control of atoms and molecules to create new materials with a variety of useful functions, including many that could be exceptionally beneficial in medicine. However, concerns are growing that it may have toxic effects, particularly damage to the lungs. Although nanoparticles have been linked to lung damage, it has not been clear how they cause it.

In a study published online June 11 in the newly launched Journal of Molecular Cell Biology Chinese researchers disC 19ered that a class of nanoparticles being widely developed in medicine - ployamidoamine dendrimers (PAMAMs) – cause lung damage by triggering a type of programmed cell death known as autophagic cell death. They also showed that using an autophagy inhibitor prevented the cell death and counteracted nanoparticle-induced lung damage in mice.

"This provides us with a promising lead for developing strategies to prevent lung damage caused by nanoparticles. Nanomedicine holds extraordinary promise, particularly for diseases such as cancer and viral infections, but safety concerns have recently attracted great attention and with the technology evolving rapidly, we need to start finding ways now to protect workers and consumers from any toxic effects that might come with it," said the study's leader, Dr. Chengyu Jiang, a molecular biologist at the Chinese Academy of Medical Sciences in Beijing, China.

The first nanomaterial was developed by German scientists in 1984. Nanomaterials are now used in a variety of products, including sporting goods, cosmetics, and electronics. The fact that unusual physical, chemical, and biological properties can emerge in materials at the nanoscale makes them particularly appealing for medicine. Scientists hope nanoparticles will be able to improve the effectiveness of drugs and gene therapy by carrying them to the right place in the body and by targeting specific tissues, regulating the release of drugs and reducing damage to healthy tissues. They also envision the possibility of implantable nano devices that would detect disease, treat it and report to the doctor automatically from inside the body. The US Food and Drug Administration has approved some first generation nanodrugs. One example is Abraxane, a nano formulation of the anti-cancer chemotherapy paclitaxel.

Lung damage is the chief human toxicity concern surrounding nanotechnology, with studies showing that most nanoparticles migrate to the lungs. However, there are also worries over the potential for damage to other organs.

In the study, the researchers first showed, through several independent experiments, that several types of PAMAMs killed human lung cells in the lab. They did not observe any evidence that the cells were dying by apoptosis, a common type of programmed cell death. However, they found that the particles triggered autophagic cell death through the Akt-TSC2-mTOR signaling pathway. Autophagy is a process that degrades damaged materials in a cell and plays a normal part in cell growth and renewal, but scientists have

found that sometimes an overactivity of this destruction process leads to cell death.

The researchers also found that treating the cells with an autophagy inhibitor known as 3MA significantly inhibited the process, increasing the number of cells that survived exposure to the nanoparticles.

"Those results, taken together, showed that autophagy plays a critical role in the nanoparticle-induced cell death," said Dr. Jiang.

The scientists then tested their findings in mice. They found that introducing the toxic nanoparticles significantly increased lung inflammation and death rates in the mice, but injecting the mice with the autophagy inhibitor 3MA before introducing the nanoparticles significantly ameliorated the lung damage and improved survival rates.

"These experiments indicate that autophagy is indeed involved in lung damage caused by these nanoparticles and that inhibition of this process might have therapeutic effects," Dr. Jiang said. "We will likely need to look for additional new inhibitors to block lung damage as this particular compound is not stable in humans, but this gives us a promising lead for the first time."

"Our study has identified the principle for developing such compounds. The idea is that, to increase the safety of nanomedicine, compounds could be developed that could either be incorporated into the nano product to protect against lung damage, or patients could be given pills to counteract the effects," Dr. Jiang said, adding that the findings could also provide important insight into how nanoparticles cause other toxic effects.

It is not clear whether other types of nanoparticles would cause lung damage via the same mechanism, but some may, Dr. Jiang said. The group's research also suggests that blocking autophagic cell death could perhaps be useful in combating other causes of lung damage.

--https://www.sciencedaily.com/releases/2009/06/090610192431.htm

The Shadow of Death

On the Druidic festival of Samhein (the Day of the Dead) 31, October 2019, a 5G Summit was held in the Jesuit-founded city Sao Paulo, Brazil, under the world's largest idol of the Saturnian Christ aka Antichrist. If you think the date and location were chosen at random, guess again. For the very same day (Samhein 31, October) the WHO released news of the first laboratory-confirmed case of middle east respiratory syndrome CV infection.

It's been scientifically proven that radio frequencies above a certain limit cause damage to humans as well as other living things.

In 971-2 a US Naval Medical Research Institute report on harmful effects of Electromotive force (EMF) Radiation found death, heart attacks, impotency, sterility, infertility, lactation inhibition, decreased fetal development, insomnia, cataracts, diabetes, seizures, hypochondria, headaches, fever and EEG, EKG abnormalities resulted from EMF exposure.

In a US senate hearing the wireless industry brashly admitted they have not done any safety studies and don't plan to.

Artemis Networks is a wireless technology company responsible for the software-defined radio technologies p-Cell and p-Wave. This technology is capable of speeds hundreds of times faster than other technologies under conditions of heavy usage and interference.

The Artemis logo is an icon of an upside-down uterus. Kind of like an upside down satanic cross or upside-down satanic pentagram. Why?

Because this Luciferian technology is designed to cause infertility and ovarian cancer in young girls, to make sure male sperm will not fertilize their eggs.

5G was secretly tested on college students at the University of Bristol in the UK beginning in 2015, resulting in a number of suicides and sudden death, which is why 5G Satellites are being launched by a dozen corporations to blanket the Earth with targeted millimeter wave radiation.

Hundreds of scientists have been trying to sound the alarm and raise the red flags. Dr. Martin Pall PhD for example, has conducted research that has laid out the mechanisms of how wireless radiation causes harm in our cells, and calls 5G "the stupidest idea in the history of the world."

5G at 60GHz millimeter wave radiation interacts with Oxygen molecules resulting in 98% attenuation/absorption which is why it is called the 'Last Mile' frequency.

The 60Ghz 5G millimeter wave radiation effectively inhibits oxygen transfer from lungs to red blood cells resulting in pneumonia-like symptoms and death. Much like CV

5G can target an individual and 60GHz is the Holy Grail of 5G, because the millimeter wave signal does not travel far beyond its intended target and prevents oxygen from being absorbed by the blood. Accuracy can be limited to a degree where there are large crowds of people. Hence the need to introduce the social distancing rule.

In Sept 2017, 180 Doctors and Scientists sent a letter to EU government leaders to halt deployment of 5G over major health concerns.

On Nov 6, 2017, several hundred birds dropped dead from the sky at the Hague in the Netherlands, during a transmission test of a 5G Mast. The test was deemed successful, so the Federal Communications Commission (FCC) approved Elon Musk's SpaceX to launch the first two 5G test satellites in February of 2018, as part of the initial Starlink constellation.

Though headquartered at Washington DC, the FCC is really under the United Nations International Telecom Union, headed by Houlin Zhao in Geneva. Zhao was the UN representative at the 2019 'Earth Summit' aka the Rio+20 'Sustainable Development Conference', effectively calling for the elimination of 93% of humanity.

Two years previous on September 1, 2017, Houlin Zhao attended a private meeting with Jesuit Pope Francis at his office in Vatican City.

"Birds of a feather flock together', or so they say. Published in 2015, the Pope's Encyclical (Teaching Paper) says:

“The triumph of science is realizing Earth can only support 1 billion people”.

Which effectively calls for eliminating 6/7th of humanity to combat global warming.

Six months earlier, on February 11, 2017, the Jesuit director of the NIAID, Dr. Anthony Fauci (Fauci means Sickle) addressed a forum held at Georgetown University on pandemic preparedness. Fauci said; The Trump administration will not only be challenged by ongoing global health threats such as influenza and HIV, but also by a surprise infectious disease outbreak.

You may recall how around the same time many were saying the astronomical alignment due on September 23, 2017 would fulfil the first two verses of Revelation Chapter12.

On September 14, 2017, AT&T Audience Network premiered the apocalyptic Documentary, 'The Sign', which follows the lives of real people following signs to the catastrophic end of the world on September 23, 2017. Using a logo of the Black Sun rimmed by a Solar Halo, the film attempts to tie in Revelations 12:1 with the solar corona of September 23, 2017.

The producers AT&T are the largest 5G infrastructure investor and spun off from Bell Labs creating Lucent Technology around 23 years ago. The Lucent (Lucifer's Intelligence) company logo is the Ouroboros, a snake holding its tail in its mouth.

Based on Dante's 'Inferno', Lucent's Plan 9 project released a development of their work as the 'Inferno' Operating System in 1997.

Plan 9 is named from the ninth circle of HELL in Dante's 'Inferno' and uses a computer protocol called STYX Architecture, named after the river surrounding the borders of hell. INFERNO uses LIMBO (edge of hell) esoteric programming language, which is interpreted by Dis Ops System. Dis

refers to 'Dis Pater', the Roman god of the underworld, later subsumed by Pluto or Hades.

On January8-12, 2019 the CES (Consumer Electronics Show) highlighted AT&T's plan to install 5G in hospitals, stadiums, schools and cities world-wide.

On April 1 (the day that mocks Jesus as the fool) 2019, the Federal Communications Commission auctioned off frequencies above 24GHz for 5G satellites.

On April 12, FCC Chairman Ajit Pai announces the third and final auction of 3400MHz 5G bandwidth for Dec 10, 2019, making interference with weather satellites and accurate forecasting a certainty.

Which begs the question, why on earth would nations put up with the US dictating the use of space-borne health hazards? Not in the least when Donald Trump is having none of it. For Trump's $10 million Mar-a-Lago estate in Florida is alleged to be exempt from 5G. I wonder why?

Known as '5G Syndrome', symptoms mimicking CV can be transmitted electronically via 5G in a process called Electroporation. This process introduces DNA or chromosomes into bacteria or other cells using a pulse wave of electricity to briefly open the pores in the cell membranes. Once symptoms, primarily fever show, Quarantine will follow.

The single best proof of the quite obvious 5G-CV linkage are the cruise ships such as the Diamond Princess equipped with 5G technology that have seen an inexplicable mushrooming of CV cases, even after all the passengers were quarantined.

What really happened on the quarantined cruise ships is that many passengers were likely quite vulnerable to the seasonal flu for a variety of underlying health issues. Then, when they entered the fully operational 5G hotspot on the ships, their immune system was profoundly weakened so that they would be susceptible to any influenza strain, including the novel CV.

In 2019 SpaceX received approval to launch nearly 12,000 Starlink satellites and has since applied to launch thousands more. Space aka the Firmament=Heaven; X=Chi=Messiah, and Starlink is in reference to the Chaldean 6-pointed star of Saturn aka Moloch.

On Tartan Day April 6, 2019, Amazon announced the launch of 3000 5G Satellites, the very same day that 26,000 Scientists sent a letter to every nation on Earth, the WHO and the EU, objecting to 5G deployment over multiple grievous health concerns.

Around the same time, Verizon Communications were busy installing 5G at dozens of cities across the US. In the meanwhile, EE began rolling out 5G cell towers right across the UK.

On Dec 29, 2019 Vladimir Putin announced 2020 as the Year of Russia-Chinese Scientific Technical and Innovative Cooperation in AI, IOT (Internet of Things) and 5G Communication.

China's god is the Red Dragon, and in 2019 Wuhan City was designated a 5G Demonstration Zone with 10,000 5G Base Stations. Wuhan is the HQ of 5G phone maker Huwei and is the Silk Road location called 'China's Thoroughfare'.

Wuhan is the first city in the world to implement 5G Broadband and is designated to become a 5G Smart City with 5G Smart Health.

Designed in Israel and deployed in 2019, millions of 5G antennas are now strategically located in most large cities and road intersections across the earth, but especially so in the US. Thousands of AI controlled killing machines dominate the skies above the earth targeting cell phones, smart meters and 5G modems worldwide.

Whilst accustomed to think 'Artificial Intelligence', effectively 5G is run by AI, named after the Canaanite city of Ai meaning a 'heap of ruins' (Joshua 8:28). With the use of direct energy weaponry, and an algorithmic program which recognizes words, phrases and insubordinations used since the 1950's, Artemis 5G IOT (Internet of Things) is the catalyst, the ultimate control

weapon, capable of destroying all flesh on earth including plants etc. and reducing the earth to the condition of the former city of Ai, a 'heap of ruins'.

In the 1991 'Terminator' franchise, worldwide domination and the end of humanity is facilitated by the Artificial Intelligence machines connected to SkyNet which controls Terminators via the Internet. This was a fictional scenario of course, and do we not live in the real world?

Skynet 5G Global Broadband is capable of terminating not only all flesh on Earth (both human and animal) but grass and trees, seen in the First Trumpet Warning (Revelation 8:7). Jesus warned “Except those days should be shortened, there should no flesh remain” (Mat 24:22).

5G modems in homes, schools, workplaces, motor vehicles, commercial aircraft and strategically placed 'Hubs', relay information to and from thousands of Satellites alleged to be in low earth orbit; all approved by the United Nations International Telecom Union.

Military weapons like Boeing's CHAMP are 5G, AI controlled microwave EMP missiles capable of instantly frying and knocking out electronics anywhere, including Crypto currencies like Libra which require electricity, computing and Internet access.

Like an Electronic Tower of Babel, Artemis 5G Global Broadband is connected to the IOT (Internet OF Things); and Blackstone's KL-03 RF hardware chips, are in every device world-wide which in turn is connected to the IOT.

Malbolge (the 9th circle of hell) is AT&T’s esoteric programming language. Inferno is designed to take the chaos out of the Electronic Tower of Babel, because Inferno ties the IOT (Internet of Things) together making all devices interconnected.

This worldwide Beast controlled by AI (Artificial Intelligence) is writing its own history and scripture and represents total spectrum dominance for Gnosticism.

Why Artemis? Artemis/Diana is the goddess of Witchcraft and of the Hunt. These people are not stupid or careless, they are highly intellectual and

calculating Satanists on the verge of destroying the earth and everyone in C 19enant with Jesus.

It's all out in the open now, for all this information can be found in the public domain and in peer-reviewed research papers.

Wicked men have the technology to cause folk to think; 'Only God can do something like this'. 5G coupled with Tesla based weapons will destroy the Earth and Jesus will return as the Word of God to "destroy them which destroy the earth" (Revelation 11:18).

--Allan Cornford

Chapter 4

The Medical Consequences of Mass Hypnosis

Superstition

A superstition is any belief or practice based upon one's trust in luck or other irrational, unscientific, or supernatural forces. Often, it arises from ignorance, a misunderstanding of science or causality, a belief in fate or magic, or fear of that which is unknown.

"The most dangerous man to any government is the man who is able to think things out for himself, without regard to the prevailing superstitions and taboos."

— Henry L. Mencken (1880-1956) American journalist editor & satirist

The Corona Carnival

Want to stop the CV Pandemic? Just turn off your television, walk outside, and take a hike on any country road. It disappears into the mist just like the illusion that it is. There is no virus…just economic collapse that is being C 19ered up by the fake Pandemic.

EMF Radiation and 5G

Non-Ionizing Radiation

Non-ionizing (or non-ionizing) radiation refers to any type of electromagnetic radiation that does not carry enough energy per quantum (photon energy) to ionize atoms or molecules—that is, to completely remove an electron from an atom or molecule. Instead of producing charged ions when passing through matter, non-ionizing electromagnetic radiation has sufficient energy only for excitation, the movement of an electron to a higher energy state. In contrast, ionizing radiation has a higher frequency and shorter wavelength than non-ionizing radiation and can be a serious health hazard; exposure to it can cause burns, radiation sickness, cancer, and genetic damage. Using ionizing radiation requires elaborate radiological protection measures, which in general are not required with non-ionizing radiation.

The region at which radiation becomes considered as "ionizing" is not well defined, since different molecules and atoms ionize at different energies. The usual definitions have suggested that radiation with particle or photon energies less than 10 electronvolts (eV) be considered non-ionizing. Another suggested threshold is 33 electronvolts, which is the energy needed to ionize water molecules. The light from the Sun that reaches the earth is largely composed of non-ionizing radiation, since the ionizing far-ultraviolet rays have been filtered out by the gases in the atmosphere, particularly oxygen.

The remaining ultraviolet radiation from the Sun causes molecular damage (for example, sunburn) by photochemical and free-radical-producing means.[citation needed]

Different biological effects are observed for different types of non-ionizing radiation. The upper frequencies of non-ionizing radiation near these energies (much of the spectrum of UV light and some visible light) are capable of non-thermal biological damage, similar to ionizing radiation. Health debate therefore centers on the non-thermal effects of radiation of much lower

frequencies (microwave, millimeter and radio wave radiation). The International Agency for Research on Cancer recently stated that there could be some risk from non-ionizing radiation to humans. But a subsequent study reported that the basis of the IARC evaluation was not consistent with observed incidence trends. This and other reports suggest that there is virtually no way that results on which the IARC based its conclusions are correct.

Health Risks

Non-ionizing radiation can produce non-mutagenic effects such as inciting thermal energy in biological tissue that can lead to burns. In 2011, the International Agency for Research on Cancer (IARC) from the World Health Organization (WHO) released a statement adding RF electromagnetic fields (including microwave and millimeter waves) to their list of things which are possibly carcinogenic to humans.

In terms of potential biological effects, the non-ionizing portion of the spectrum can be subdivided into:

1. The optical radiation portion, where electron excitation can occur (visible light, infrared light)
2. The portion where the wavelength is smaller than the body. Heating via induced currents can occur. In addition there are claims of other adverse biological effects. Such effects are not well understood and even largely denied. (Microwave and higher-frequency RF).
3. The portion where the wavelength is much larger than the body, and heating via induced currents seldom occurs (lower-frequency RF, power frequencies, static fields).

The above effects have only been shown to be due to heating effects. At low power levels where there is no heating effect, the risk of cancer is not significant.

	Source	Wavelength	Frequency	Biological effects
UVA	Black light, Sunlight	318–400 nm	750–950 THz	Eye: photochemical cataract; skin: erythema, including pigmentation
Visible light	Sunlight, fire, LEDs, light bulbs, lasers	400–780 nm	385–750 THz	Eye: photochemical & thermal retinal injury; skin: photoaging
IR-A	Sunlight, thermal radiation, incandescent light bulbs, lasers, remote controls	780 nm – 1.4 μm	215–385 THz	Eye: thermal retinal injury, thermal cataract; skin: burn
IR-B	Sunlight, thermal radiation, incandescent light bulbs, lasers	1.4–3 μm	100–215 THz	Eye: corneal burn, cataract; skin: burn
IR-C	Sunlight, thermal radiation, incandescent light bulbs, far-infrared laser	3 μm – 1 mm	300 GHz – 100 THz	Eye: corneal burn, cataract; heating of body surface
Microwave	Mobile/cell phones, microwave ovens, cordless phones, millimeter waves, airport millimeter scanners, motion detectors, long-distance telecommunications, radar, Wi-Fi	1 mm – 33 cm	1–300 GHz	Heating of body tissue

Radio-frequency radiation	Mobile/cell phones, television, FM, AM, shortwave, CB, cordless phones	33 cm – 3 km	100 kHz – 1 GHz	Heating of body tissue, raised body temperature
Low-frequency RF	Power lines	>3 km	<100 kHz	Cumulation of charge on body surface; disturbance of nerve & muscle responses[11]
Static field[2]	Strong magnets, MRI	Infinite	0 Hz (technically static fields are not "radiation")	Electric charge on body surface

Hypercapnia: The Mask of Death

Wearing a mask for prolonged hours, as the WHO and CDC have declared is mandatory in public, may eventually result in Hypercapnia:

Hypercapnia (from the Greek hyper = "above" or "too much" and kapnos = "smoke"), also known as hypercarbia and CO2 retention, is a condition of abnormally elevated carbon dioxide (CO2) levels in the blood. Carbon dioxide is a gaseous product of the body's metabolism and is normally expelled through the lungs. Carbon dioxide may accumulate in any condition that causes hypoventilation, a reduction of alveolar ventilation (the clearance of air from the small sacs of the lung where gas exchange takes place). Inability of the lungs to clear carbon dioxide leads to respiratory acidosis. Eventually the body compensates for the raised acidity by retaining alkali in the kidneys, a process known as "metabolic --Wikipedia

Severe Hypercapnia symptoms include:

- **confusion.**
- **coma.**

- ▪**depression or paranoia.**
- ▪**hyperventilation or excessive breathing.**
- ▪**irregular heartbeat or ▪arrhythmia.**
- ▪**loss of consciousness.**
- ▪**muscle twitching.**
- ▪**panic attacks.**

What is Hypercapnia?

Hypercapnia is a buildup of carbon dioxide in your bloodstream. It affects people who have chronic obstructive pulmonary disease (COPD).

If you have COPD, you can't breathe as easily as other people do. Your inflamed airways and damaged lung tissue make it harder for you to breathe in the oxygen you need and breathe out the carbon dioxide that your body wants to get rid of.

Hypercapnia isn't a problem for everyone with COPD, and it might not happen to you. Your doctor has probably suggested medication to make breathing easier. You may also use supplemental oxygen. You'll breathe it in through a mask or nosepiece attached by tubes to a device called a concentrator, which acts like a pump to filter and provide a clean, steady stream of air.

What Happens When You Have Hypercapnia?

Hypercapnia changes the pH balance of your blood, making it too acidic. This can happen slowly or suddenly. If it happens slowly, your body may be able to keep up by making your kidneys work harder. Your kidneys release and reabsorb bicarbonate, a form of carbon dioxide, which helps keep your body's pH level balanced.

A sudden rise in carbon dioxide, called acute hypercapnia, is more dangerous, because your kidneys can't handle the spike. This is most likely to happen if you have a severe case of COPD or if you get a flare-up. Either way, you may be breathing too slowly, which means you aren’t taking in air and letting out carbon dioxide at a healthy rate.

-- https://www.webmd.com/lung/copd/hypercapnia-copd-related#1

Carbon Dioxide Re-Breathing with Close Fitting Face Respirator Masks

Guidelines for the use of personal protective equipment when caring for patients who are affected by highly infectious pathogens such as SARS, avian influenza and tuberculosis include the use of high efficiency respirators that filter at least 95% of particles with a median diameter of 0.1 micron. These must therefore be close fitting to prevent air leakage [1, 2]. A healthy intensivist (SF), wearing such a respirator (Tecnol Fluidshield PFR95, Kimberly Clark Corporation, Roswell, GA) to perform a percutaneous tracheostomy on a patient with multidrug resistant pulmonary tuberculosis, experienced dyspnoea, tachycardia and tremor after 30 min. End-tidal carbon dioxide measured at the mouth by hand-held capnometry was 6.3 kPa (normal value 5.3 kPa). We postulated that the symptoms were due to hypercapnia.

We measured the end-tidal carbon dioxide levels in four anaesthetists wearing the same design of mask, before and after performing tracheal intubation on another patient with pulmonary tuberculosis. Measurements were taken by side stream capnometer (Poet LT, Criticare, Waukesha, WI) using a 15-mm T-piece held between the lips. The mean baseline end-tidal carbon dioxide level was 5.18 kPa. Post-procedure (20 min later) the mean end-tidal carbon dioxide level was 5.95 kPa ($p = 0.007$). No subjects reported symptoms of hypercapnia. The rise in end-tidal carbon dioxide is due to rebreathing of expired alveolar gas that is ‘trapped’ in the respirator, with the degree of rebreathing being proportional to the volume of the respirator (‘dead

space'). It is likely that all tight-fitting, high efficiency respirators will behave similarly, with only the size of dead space varying between designs.

The respiratory response to hypercapnia is an increase in minute ventilation, giving rise to the sensation of dyspnoea. Moderate (6.18 kPa) to high (7.5 kPa) levels of end-tidal carbon dioxide have also been shown to impair significantly cognitive and psychomotor performance and it is likely that this effect of carbon dioxide is dose related with no threshold [3]. Clearly, our findings are of uncertain practical significance and further trials would be required employing cognitive and psychomotor measurements and arterial blood gas analysis.

In the event of an influenza pandemic, large numbers of healthcare workers may need to wear these respirators for prolonged periods and problems with hypercapnia might reduce the tolerability of these devices. Whether psychomotor performance is affected also remains to be seen.

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Does Having a Fever Mean Your Infection Is Bacterial Rather Than Viral?

You're feeling unwell and your body temperature is rising. As you retreat to bed and ponder your misery, thoughts start going through your head.

"I've been crook before without a fever. What's different this time? Could it be that my cold — a virus — has developed into a secondary sinus or chest infection — bacterial — or have I picked up something more serious?"

Before you know it, you've moved onto thinking "maybe I need antibiotics ... I'll call the doctor in the morning".

- Q: Does having a fever mean your infection is bacterial rather than viral?
- A: A fever usually means you have an infection, but it doesn't tell you if it's bacterial or viral.

But fever expert Doctor Paul Young suggests you stop for a reality check.

> Yes, having a fever is a clear sign that something is going on inside your body, says Dr Young, a fever researcher and intensive care specialist at Wellington Hospital.

But the fever tells you little about what's making you ill or how unwell you are.

"The most common thing that makes you have a fever, far and away, is an infection. So if you have a fever, basically it [almost always] means you have an infection," Dr Young said.

But both bacteria and viruses can cause fevers and there's no specific difference between a fever caused by bacteria and one caused by viruses.

How infections cause fever

When you're infected with a bug, your immune system recognizes it as a foreign invader and a myriad of processes are triggered to try to kill the bug off.

Is bringing your temperature down important when you have a fever?

Some of these processes result in chemicals called pyrogens flowing into your blood stream.

When these pyrogens travel to the brain, they interact with a brain region called the hypothalamus, which acts as the body's thermostat.

When the hypothalamus detects the pyrogens, it "resets" the thermostat to a higher temperature and tells the body to start processes that generate and retain more heat. The result is a fever.

Dr Young says that as well as pyrogens, nervous system signals can also trigger a fever.

"You do produce substances in your liver that act through the vagus nerve (a nerve connecting the abdomen to the brain) to change the thermostat," he said.

But both bacteria and viruses can trigger the resetting of the body's thermostat through these kinds of mechanisms.

So the presence or absence of a fever isn't a good guide to whether it's one kind of infection or the other.

You only have to be laid low with flu, which is caused by the influenza virus, to know that viruses can certainly cause fever.

Whatever the cause, it's thought the increase in body temperature may be helpful in fighting the infection because most bacteria and viruses can only survive in a narrow temperature range.

By making the body hotter, it may help kill off the infectious organism. But no-one knows this for sure, Dr Young says.

Bacteria or virus — why does it matter?

The main reason you might want to know if you have a bacterial rather than a viral infection is because only the bacterial variety will respond to antibiotics.

Taking antibiotics won't help you fight off a virus as antibiotics target and kill bacteria

It's also worth noting that antibiotics aren't always necessary even if you do have a bacterial infection so it's probably best to talk to your doctor about this.

It's important we all understand this as taking antibiotics when we don't need them can contribute to antibiotic resistance, which makes it harder to find drugs that work when you do have a serious bacterial infection that needs treating.

The most common pathogens that cause infections are actually viruses, Dr Young says. And by and large viruses are self-limiting illnesses that get better by themselves with time, without you needing to do anything much, other than perhaps rest.

If you do happen to have a viral infection that's more serious, other symptoms are more important tell-tale signs of how ill you are, he says.

"If it's an exception [to the 'self-limiting' virus rule], it's not going to be the fever that's telling you it's a bad one," Dr Young said.

--https://www.abc.net.au/news/health/2015-08-27/does-having-a-fever-mean-your-infection-is-bacterial-or-viral/6728500

Antigens

The loosening of lock down is merely "PHASE 2" (Gates' own words) of Bill Gates' plan to create the illusion of C 19 resurgence being linked to free social movement.

When people go back out, after sheltering in place, they will get sick much easier because when they were sheltering in place, they were not encountering the proper antigens (toxins or other foreign substances which induces an immune response in the body, especially the production of antibodies) they need to encounter in order to keep their immune system fit.

The presence of antigens in the body normally triggers an immune response, and so these daily encounters with antigens help the body to maintain the correct flora, which, in turn, helps each person to develop a strong and healthy immune system.

Subsequently, disease will spike after shelter in pace is lifted, but not from C 19, but rather, as a result of the sheltering in place, itself, and how it weakened everyone's immune system.

Additionally, wearing a mask only make a person recirculate their own CV infection rate and viral load, which is very unhealthy.

It is Easy to Test Positive for CV When Everyone Has CVes Since Birth

CVes are a group of related viruses that cause diseases in mammals and birds. They are quite common in most humans and not lethal.

The common cold is often the result of CVes. In humans, CVes can cause respiratory tract infections that can range from mild to lethal. Mild illnesses include some cases of the common cold (which has other possible causes, predominantly rhinoviruses), while more lethal varieties can cause SARS, MERS, and the alleged C 19. Symptoms in other species vary. In chickens, they cause an upper respiratory tract disease, while in cows and pigs they cause diarrhea. There are yet to be vaccines or antiviral drugs to prevent or treat human CV infections.

Corina virus can easily be placed in a Vaccines.

Here is a list of some CV:

- Genus: AlphaCV
- Species: Human CV 229E, Human CV NL63, Miniopterus bat CV 1, Miniopterus bat CV HKU8, Porcine epidemic diarrhea virus, Rhinolophus bat CV HKU2, Scotophilus bat CV 512
- Genus BetaCV; type species: Murine CV
- Species: BetaCV 1 (Human CV OC43), Human CV HKU1, Murine CV, Pipistrellus bat CV HKU5, Rousettus bat CV HKU9, Severe acute respiratory syndrome-related CV (SARS-C 19, SARS-C 19-2), Tylonycteris bat CV HKU4, Middle East respiratory syndrome-related CV, Hedgehog CV 1 (EriC 19)
- Genus GammaCV; type species: Infectious bronchitis virus
- Species: Beluga whale CV SW1, Infectious bronchitis virus
- Genus DeltaCV; type species: Bulbul CV HKU11
- Species: Bulbul CV HKU11, Porcine CV HKU15

--Wikipedia

116 Countries Are Calling for An Independent Investigation into The CV Crisis

The two-day, virtual World Health Assembly meeting has begun as more than 100 countries back a resolution calling for a probe into the response to the C 19 pandemic.

A resolution at the annual assembly calls for an investigation into the global response coordinated by the World Health Organization to the CV crisis, per NBC News. A draft mentioning the need for an "impartial, independent and comprehensive evaluation" of the response to C 19 is being supported by 116 countries out of 194, including Australia, Britain, Russia, and members of the European Union, Reuters reports. The European Union is

presenting the resolution, which also mentions identifying "the zoonotic source of the virus and the route of introduction to the human population."

Chinese President Xi Jinping in a remote speech at the assembly on Monday claimed the country has acted "with openness and transparency" during the crisis, saying any investigation should only occur after the virus is under control, BBC News reports.

President Trump last month announced funding to the World Health Organization would be put on hold "while its mismanagement of the CV pandemic is investigated," accusing the organization of having a "dangerous bias towards the Chinese government." When Australian Prime Minister Scott Morrison called for a CV inquiry last month, Axios notes that China "accused Australia of doing the United States' political bidding." The resolution that has the support of more than 100 countries, though, doesn't actually name China, The Washington Post notes.

The United States, Reuters reports, appears likely to back the resolution at the World Health Assembly, with U.S. Ambassador Andrew Bremberg saying, "My hope is that we will be able to join consensus."

--https://news.yahoo.com/more-100-countries-calling-independent-125209556.html?fbclid=IwAR1txD9DDrt7nN2l0TEdrxhMZBiitwOH_2zxbZN0TykX4f4jxKcXanC7Md4

Chapter 5

Welcome to the Gates of Hell

The Ninth Gate of Bill

What does "The Ninth Gate "mean in Roman Polanski's film noir, ***The Ninth Gate***?

The Ninth Gate is the last of nine gates that, when each is correctly passed through, are reputed to conjure, or lead to Lucifer. They are described in ***Novem Portis de Umbrarum Regni*** (***The Nine Gates of the Kingdom of Shadows***), a book written in the 17th century by Aristide Torchia. The author adapted the book from one written by the Devil himself and was burned for heresy. "The Nine Gates" purportedly contains the means to summon the Devil and acquire invincibility and immortality.

The Nine Gates

Gate 1) Mass Panic and Fear

Gate 2) Information Control and Censorship

Gate 3) Medical Martial Law with Quarantine and Social Distancing

Gate 4) Partial Reopening After the World Protests the Lockdown

Gate 5) Fake Announcement of New Spikes, Post Partial Reopening, with the Announcement of an mRNA Based Vaccination

Gate 6) Military Martial Law with the Introduction of Checkpoints and Incarceration for Offenders

Gate 7) Mandatory Vaccinations with Quantum Dot Digital Vaccination Certification Tattoos

Gate 8) Massive Worldwide Sickness and Death in the Millions from the Vaccinations

Gate 9) Introduction of Further Vaccinations to Combat Failed Vaccines

The Aftermath

- Vaccine Related Genocide in the Billions…a Scale Never Seen Before in all Human History
- The Implementation of the Fully Digital 5G New World Order Surveillance and Control Grid System to Maintain the Remaining Survivors in Work Farms as Slaves to the Technocratic Elite
- The Unveiling of the Antichrist

Enter Gate 5

Mandated mRNA vaccines are coming.

The fear campaign of C 19 is failing. People are not scared any longer of C 19. They are seeing though the fakeness of the news reports, starting to realize that the whole thing was a hoax to pressure them into accepting vaccines. These vaccines will be produced by Moderna. (CAMBRIDGE, Mass.--(BUSINESS WIRE)--May 18, 2020-- Moderna, Inc., (Nasdaq: mRNA).

Moderna, a clinical stage biotechnology company pioneering messenger RNA (mRNA) therapeutics and vaccines, has been commissioned by the Bill and Melinda gates Foundation to create a new generation of transformative medicines for C 19 patients They have announced positive interim clinical data of mRNA-1273, its vaccine candidate against Novel CV (SARS-C 19-2), from

the Phase 1 study led by the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health (NIH).

The problem is that C 19 scam failed and now we are seeing the Technocratic Elite flex their muscles in the fear and terror of losing the control that they had won in the Phase 1 of the worldwide panic that they instilled in people with the initial fake virus announcement. It will not work a second time. The hospitals were empty. Nobody was dying except on tv, in addition to common yearly elderly deaths from natural causes or the common flu, but no C 19 in sight anywhere.

Subsequently, they need to release the vaccinations quickly so that real death and genocide will occur, and then they can say "See, we were right all along. And now you need to do exactly what we say." The chess game of totalitarian control shall speedily unfold before our very eyes. Make no mistake, a mandatory vaccine campaign will be implemented, and though it will begin as voluntary, it will swiftly metamorphosize into, "Take the vaccine, or you cannot leave your home for any reason, food included."

They will starve you to force your hand, enforced by military backed, state legislature. Without the quantum dot digital vaccination certification tattoo you will not be able to buy any food, or even enter a store, nor shop online, because a digital authentication from your tattoo's unique bar code signature must be used to shop online, as well. This roll out will come out very quickly, so you'll have no choice but to comply since you're stuck in your house, starving.

The Vaccines are mRNA vaccines infused with synthetic nano tech. MRNA vaccines have ALLEGEDLY elicited potent immunity against infectious disease targets in animal models of influenza virus, Zika virus, rabies virus and others, especially in recent years, using lipid-encapsulated or naked forms of sequence-optimized mRNA. This strategy literary changes the genetic code of the DNA in Epigenetic real time. Why is this relevant. Well, mRNA viruses carry the instruction to replicate and build its viral protein right away. It doesn't require anything other than the host cell machinery to operate. In other words, it cuts down the manufacturing process significantly.

Why is that a problem? Well, mRNA has direct coding. It will do what they are programmed it to do. In this case, the RNA causes direct DNA mutation which easily leads to cancer. They can manipulate your emotions, give you autoimmune diseases, autism, anything that it is programmed to do. None of these vaccines will be properly tested, but nevertheless, they will be unleashed upon the general population like lab rats.

There is no CV vaccine and there never will be one. CVes constantly mutate, and that is why there has never been an effective Vaccine for the common cold, nor a workable one for the common flu. The C 19 Vaccine is s hoax. The idea of a cure is a hoax, as well. You have an immune system for that. It knows what to do with the flu, is all that C 19 actually is.

Prepare for Gate 6

Military Martial Law with the Introduction of Checkpoints and Incarceration for Offenders

Gates in a Nutshell

1. Event 201 = Gates
2. ID2020 = Gates
3. CV patent = Gates
4. C 19id vaccine = Gates
5. WHO/NIAID/CDC/UN funding = Gates
6. Fauci/Birx/Tedros funding = Gates
7. New Economy based on Human Activity (Patent number=WO2020060606A1 {666}) = Gates
8. Hypothesize a simulated global outbreak, required steps, various phases, overall timeline and expected outcomes (Rockefeller – Lock Step, 2010)
9. Create a very contagious but super low mortality rate virus to fit the needed plan (SARS/HIV hybrid research strain created

at Fort Detrick class 4 lab from 2008-2013 as part of a research project to find out why CV's spread like wildfire in bats but have an extremely hard time infecting humans (Hence the 4 HIV inserts, aka the missing key to infect the human ACE-2 receptor)

10. Create a weaponized version of the virus with a much higher mortality rate as a "BACKUP plan" ready to be released in phase 3 BUT ONLY IF NEEDED (SARS/HIV/MERS weaponized Trybrid strain created at Fort Detrick class 4 lab in 2015)
11. Transport the research strain to a different class 4 lab (National Microbiology Lab in Winnipeg Canada) and have it stolen and smuggled out by China (Shi Zhengli) on purpose and taken to China's only class 4 lab (Wuhan Institute of Virology in Wuhan China) for added plausible deniability and to help cement the wanted BACKUP public script as something to fall back on IF needed (primary script being its natural, backup script being that China created it.

–Dan O Shay

C 19 PLANdemic Phase 2

1st Wave Was A Hoax/Normal Flu

"They" know that a small part of the population will see through it and minimize the pandemic threat vocally. Some people will also loudly protest the lockdown and social distancing.

2nd Wave Will Be Real, With Lots of Death

Through recently installed 5G which starts "beam-forming" on people's heads/chests preventing oxygen uptake (remember, 5G Is 60Ghz which is the frequency of oxygen hemoglobin uptake) , which will produce respiratory distress Identified as C 19 symptoms.

People of all ages will be dying, even the young, since 5G has been installed in schools this will:

1) Totally discredit researchers, patriots, citizen reporters, truthers, or anybody else that questioned the government narrative and seriousness of the 'pandemic'

2) Discredit lockdown protesters as irresponsible, destroying possibility of any future protest

3) Destroy the premise that only the old are vulnerable

4) Cause a massive and harsh lockdown, worse than before, accompanied by internal border checkpoints. With virtually no resistance whatsoever.

-- Dan O Shay

The Euthanasia of Mankind: Wave After Wave of Death

Multiple Iterations of The Hegelian Dialectic

(Caution: The following conclusions are not advised to be read by those who have no grounding in Eternal Life through Christ. Thousands of Atheists, worldwide, have turned to suicide, and it is because of the same type of conclusions ensuing in this writing.)

The Jesuit Scientific Dictatorship that is currently dictating medical martial law to the world through their agents, Bill Gates, and Anthony Fauci, govern through running seemingly infinite iterations of The Hegelian Dialectic: Problem-Reaction-Solution.

The tension between scientific recommendations of caution in the lifting of restrictions and the economic and political imperatives to get people back to work create the perfect next iteration of the never-ending Hegelian Dialectic for the Jesuit puppets, Gates and Fauci led Technocracy.

Remember, the Jesuits are ten times more intellectually sophisticated than anyone you'll ever meet. They are the intellectual giants of the science and geo-political worlds, and masters of mind control…as you are seeing.

The first wave of Pandemic was intentionally made to be weak, like a mild flu. However, that was just part of a larger, overarching plan. The Technocrats knew people would figure it out and get tired of the lie and want to get back to life as normal. These are expert social psychologists, and they run thousands of computer simulations which model group think and social

psychological responses to the scenarios that they create. They are 100 steps ahead of everyone. They already knew people would use social media to spread the world that the virus was fake. They did not try to stop the initial videos of empty hospitals, and doctors coming forward to expose he hoax. They then started to censor it all to create the illusion that there was a real war between the Truthers and the media. There was not, actually. They are orchestrating all it…the unfolding of the Civil War of those who believe in the Pandemic and those who are "not onboard".

This is how the Technocratic Elite divide the wheat from the chaff and separate the population into followers and resistors. Though running these Problem-Rection-Solution scenarios over, and over, and over, they guide the population toward their desired outcome.

The following are at least two iterations of their Pandemic psychological manipulations:

Iteration #1	Iteration #2
Problem: Virus	Problem: Lockdown
Reaction: Panic	Reaction: Economic Distress
Solution: Lockdown	Solution: Vaccine

It is easy to predict their next move once you grasp the mechanisms of advancement that they employ. And they can repeat these iterations again and again until they achieve their desired outcome:

World Governance with Everyone Vaccinated and Under a 5G Technocratic Surveillance Grid

When they release the second wave of virus Pandemic, it may be exceedingly more lethal than the first wave because it will be fortified with real poisons and dangerous CVes administered to millions in the form of testing kits and vaccinations. It will be worse in that the first wave. Nevertheless, at first, far less people will take it seriously after having been conned once by the first relatively innocuous first wave of virus hoax. But then, very soon, even the skeptical will see a real body count begin to accumulate, a body count of close friends and associates, who received testing or vaccinations. And the 5G radiation level will be increased by the Technocratic Elite, causing even those not tested or Vaccinated to get ill and even die. Eventually, even the skeptics will be psychologically cattle herded into the conclusion that the virus is very real, and that everyone needs to be vaccinated.

The Virus Heretics

And then the peer pressure and Contact Tracer Gestapo will get 100% NAZI and be backed by police brute force. The remaining objector to the tests and Vaccines, who object to sheltering in place and wearing masks, will be blamed for the death of millions. They will be exposed as dangerous to the health of the worldwide herd for taking this Pandemic lightly and blamed for the second wave of virus spike. They will be traced, identified, persecuted, and executed like the early Christians in the Roman Empire, and rest assured, many of these objectors will, indeed, be Christians. This is the Technocratic strategy for "gathering all the stragglers" in their herd extermination agenda.

Through this strategy, the Technocratic Elite will manipulate the herd into blaming **The Virus Heretics** for all that is wrong in the world, today. They will declare, "See, you didn't listen to us!". They will make people beg to stay in their own homes, beg for tests, and beg for the vaccines.

The Euthanasia of Mankind

Finally, The Third Wave (or some successive wave, thereafter) will be the **coup de grâce,** the death blow to end the suffering of a severely traumatized world population. It will be considered a Eugenics Masterpiece of

Mercy Killing by The Technocratic Elite, a necessary Vaccination poisoning of a sick, undeserving and unnecessary population who did nothing but pollute and abuse their precious GAIA, Mother Earth, with their useless existence and carbon footprint. Then shall come the "Education FEMA Camps". Then shall come Madame Guillotine to raise her bloody blade and finish The Virus Heretics.

It will be **The Euthanasia of Mankind,** against the sufferer's consent, but with the sufferer's full consent to be Vaccinated.

Push back now, or forever lose that option.

Wrong, Bill Gates: We Little People Do Have A Choice: We Can Ignore the Fearmongering

Bill Gates: You chose your role in the marketing of the virus panic. You are the billionaire so smart that, for every human being on the planet, you have determined we have "no choice." Our lives cannot return to normal until you, or, another party have "largely vaccinated the entire, global population."

Wrong, Bill. We do have a choice: We can consult history, compare the actual data to your fear-words and pretense that the globe has never seen anything like this virus, and we can ask ourselves whether it's the CV or the panic you and your media partners push that has caused many people to accept the push from the WHO, the CDC, The Clinton Foundation, Jay Inslee, Gavin Newsom and Andrew Cuomo, to name a few, that we become a super surveillance state with a centrally commanded, hobbled economy, dictatorial rules and watchers making sure we wear our masks and stay off the beaches.

Those of us who sense in the fear-mongering around the virus the highly-concentrated panic pushing the same people and entities merchandised around global: Ice age, warming, climate change, climate emergency, and can ask ourselves if we are willing to become hovel-living crawl-abouts begging for the permission to earn because of a virus that, in the United States this year, has killed half as many people as pneumonia.

We can start, Bill, by questioning you and the people surrounding you.

The great irony in all of this, Bill, is the technology you helped make a globally available tool, still — despite the efforts Silicon Valley and the media have undertaken to hide it, just as your designed when you rehearsed "controlling 'misinformation'" during your pandemic drills — is the technology that allows us to see for ourselves just how much hyperbole you are pushing.

We can watch you selling panic, we can stand as witness to you contending that it's somehow unique that people can carry a virus that may infect others — a fact of human existence, Bill — and we can pay close attention as all of your precious "models" are exposed as failures, like the failure of Common Core Math, the previous program you funded to experiment on society.

This morning, on my radio show, informed by data the mainstream media refuses to examine, and common sense, I addressed you directly about this, Bill, because I do have a choice and I will not be directed by you, the WHO, the CDC or any of the panic-pushers into swallowing your vision for my future.

Below is just some of the data, analysis, and news I consulted for the show.

Fearmongering: "Stay the blank home or the virus will go exponential!"

- Nobel Prize Awardee and Professor at the Stanford School of Medicine: Lockdowns do not alter the growth rate of the virus and no country has experienced exponential growth of C 19, and says that the lockdowns were a radical overreaction and likely unnecessary, that the development of herd immunity is the better option. Hat tip: The Blaze.

Fearmongering: "Stay the blank home, idiots, herd immunity can't happen until there's a vaccine!"

- Three, very large, statistically robust studies of prisoners who tested positive for C 19, show 95% -98% were asymptomatic, meaning, they got sick, didn't know it, and helped develop herd immunity.
- Sweden could reach 'herd immunity' in weeks, Chief Epidemiologist says.

Fearmongering: "The models are clear, if we don't lock down, we will see explosions of the virus."

- The IHME model produced by the University of Washington has utterly failed to correctly predict deaths in South Dakota, which did not lockdown … maybe because the model does not adjust for no lockdowns and, in fact, makes no predictions whatsoever about what might happen should social distancing be eased or not enforced.

Fearmongering: "We cannot open the schools, we cannot risk the lives of children, the model is very clear on this."

- Also from Stanford, a former chief of neuroradiology at Stanford University Medical Center has completely dismissed the Bill Gates-funded model from the University of Washington's Institute of Health Metrics and Evaluation, (IHME), and has called for the immediate reopening of schools. Hat tip: Legal Insurrection.

Fearmongering: "This is for your own good: Stay off the beaches or face arrest!"

- Queen Elizabeth Hospital Foundation Trust and the University of East Anglia researchers in the UK found links between low levels of vitamin D and C 19 mortality rates, according to Science Alert. Vitamin D, of course, is easily obtained by standing in the sun.
- Fearmongering: "You need to stay the blank home, just like the rest of us, going out is a betrayal of first-responders!"
- Prof Neil Ferguson, the epidemiologist whose modeling helped shape Britain's CV lockdown strategy, has quit as a government adviser after flouting the rules by receiving visits from his lover at his home.

Fearmongering: "Stay the blank home, you will flood the hospitals!"

- Cash-strapped rural hospitals face 'imminent closure' as CV bears down
- Stanford Health Care to cut workers' wages by 20%; hospital claims cuts are necessary due to C 19 economic impact.

Fearmongering: "Stay the blank home, people in Michigan are causing traffic jams at CV testing locations!"

- CBS News edits testing story after Project Veritas exposes clinic's line-stuffing ploy.

--https://mynorthwest.com/1856880/bill-gates-fear-mongering/

Bill Gates Flew with Jeffrey Epstein On the Lolita Express in 2013

Bill Gates flew with Jeffrey Epstein on The Lolita Express in 2013, the man whose charity aims to empower young girls to join a serial pedophile ring, four years after he left prison.

- Bill Gates flew from Teterboro Airport in New Jersey to Palm Beach on March 1, 2013 with Jeffrey Epstein
- Epstein, who was found dead in his jail cell on Saturday morning, had told people in the past that he was a financial adviser to Gates
- A rep for Gates' humanitarian foundation denied that Epstein ever worked for billionaire founder of Microsoft, but would not comment on the 2013 flight
- Gates and his wife have championed the education and empowerment of young women around the world through their charitable work
- Epstein had just been released from prison four years prior after pleading guilty to two counts of soliciting a minor under the age of 18 for sex

Bill Gates hitched a ride on Jeffrey Epstein's plane - four years after he served time behind bars for soliciting a minor under the age of 18 for sex.

Flight records reveal that Gates flew with Epstein from Teterboro Airport in New Jersey to Palm Beach on March 1, 2013, one of the few flights that year where pilot Larry Viskoski recorded the name of a passenger.

A representative for Gates did not respond to a request for comment, and the pairing is an odd one given the work Melinda Gates and the couple's foundation does for young women around the world.

The pair had spent time together previously, most notably at the annual Edge Dinner, which each year welcomes billionaires from around the world to come together and discuss advancements they are working in on the worlds of math, science, and technology.

In fact, the 2013 dinner took place just two nights before they flew to Florida, though neither of the men are pictured attending that year's event.

Epstein did claim he worked as a financial adviser to Gates for some time, but that claim was later shot down by the Microsoft founder's representative.

The two men do however both own property in southern Florida, where Epstein had two homes including a $12 million Palm Beach mansion and Gates owns a five-property compound in Wellington that he purchased for a total of $40 million.

Humanitarian and human trafficker: Bill Gates (left) flew from Teterboro Airport in New Jersey to Palm Beach on March 1, 2013 with Jeffrey Epstein (right)

The meeting came the same year that Gates hitched a ride with Epstein on his private plane - Lolita Express - from New Jersey to Florida. Flight records show Gates flew with Epstein on March 1, 2013

Flight records: Epstein, who was found dead in his jail cell on Saturday morning, had told people in the past that he was a financial adviser to Gates (flight data above)

In a biography that was published on the website for Edge, but later deleted, it is noted that Epstein 'founded the Jeffrey Epstein VI Foundation in 2000 to fund and support cutting edge science around the world.'

He is also said to be 'one of the largest supporters of individual scientists, including theoretical physicist Stephen Hawking and Nobel Laureates Gerard ‘t Hooft, David Gross and Frank Wilczek.'

In an alarming addition, the biography then states that Epstein has taken 'an active role in supporting education across the United States as well as philanthropy in the US Virgin Islands, where the foundation is based.'

-- https://www.dailymail.co.uk/news/article-7350469/Bill-Gates-flew-Jeffrey-Epstein-Loliota-Express-2013-years-pedophile-prison-stay.html

Bill Gates and Other Major Pharmaceutical Companies Bankrolled Neil Ferguson

Ferguson’s model and the University of Washington’s model cited by Dr. Fauci got funding from Bill Gates’ foundation.

Ferguson co-founded the MRC Centre for Global Infectious Disease Analysis, based at Imperial, in 2008. It is the leading body advising national governments on pathogen outbreaks.

It gets tens of millions of dollars in annual funding from the Bill & Melinda Gates Foundation, and works with the UK National Health Service, the US Centers for Disease Prevention and Control (CDC), and is tasked with supplying the World Health Organization with "rapid analysis of urgent infectious disease problems."

Neil Ferguson, one of the Government's senior scientific advisors on the CV response was financed by the pharmaceutical industry, Bill Gates being the biggest financial heavy hitter, in the run-up to the 2009 Swine Flu pandemic,

and now the C 19 Pandemic unearthed reports reveal. Professor Neil Ferguson is one of the most senior advisors to the Government on the CV outbreak. Tasked with shaping the UK's response, Prof Ferguson sits on the Scientific Advisory Group for Emergencies (SAGE) with several other scientists.

CV lockdown end: UK warned to brace for year of restriction He spearheads a team at Imperial College London which produces the mathematical prediction models largely credited with prompting the Government to impose the current lockdown. Prof Ferguson has a history in working as an epidemiologist for over 20 years, though he began and finished his studies in the field of physics. Just as Prof Ferguson's prediction models have proved decisive in the ongoing fight against CV, so too were his models used as a precedent in the fight against Swine Flu (N1H1).

His team at Imperial College predicted a scenario in which 65,000 people in the UK died – a significant benchmark in the WHO's decision to issue a pandemic.

- **CV UK latest: Neil Ferguson previously received fees from pharmaceutical companies**
- **CV UK latest: Neil Ferguson previously received fees from pharmaceutical companies (Image: GETTY)**
- **Swine Flu: Before the N1H1 outbreak Ferguson had ties with GSK and Roche**
- **Swine Flu: Before the N1H1 outbreak Ferguson had ties with GSK and Roche**
- **In the end, the UK death toll from Swine Flu stood at 457.**

Added to this, the controversy over so-called "conflicts of interest" with those who advised the World Health Organization (WHO) but had simultaneous ties with the pharmaceutical industry.

The WHO requires all advisors to declare any conflicts of interest prior to their being recruited. In 2010, the WHO revealed the names of 16 experts and advisors on its emergency committee which recommended the declaration

of the Swine Flu pandemic – five of them having had links with the pharmaceutical industry.

Neil Ferguson: The Epidemiologist is one of the UK's most senior scientific government advisors. The 2018 documentary "Trust WHO" noted how Prof Ferguson, who was on the committee, "reported conflicts of interest". The film's maker, Lilian Franck, said: "Neil Ferguson declares consultancy fees from GlaxoSmithKline, Baxter, and Roche.

At the time, in an interview with the pharmaceutical publication, Scrip, Prof Ferguson explained the extent of his ties to the companies.

He said:

"I chose to end the relationship with GSK and Roche in 2007 due to the mounting pressures of other (more important) work, and because I wanted to pursue advisory work with public bodies which is more easily done without current relationships with commercial companies."

He added:

"I think it would be difficult to find a true expert on influenza vaccines and antiviral drugs who has not worked at some time with pharma companies.

"The development of such products is undertaken by commercial companies, they have the data, and they are interested in research which relates to their products.

- **The pandemic proved a perfect financial opportunity for the pharmaceutical industry.**
- **JPMorgan estimated some $7-10 billion (£5-8bn) was made off 2009 vaccine profits alone.**
- **When contacted by Express.co.uk, Prof Ferguson said he had no conflicts of interest in relation to the CV pandemic.**

-- https://www.express.co.uk/news/uk/1277632/CV-uk-neil-ferguson-epidemiology-virus-C 19-vaccine-boris-johnson-

spt?fbclid=IwAR1NW2P5Our2jF4SPKhBD9DNsxWcxPYq66NnYbsm1TxCWBvjQlPyUx
M5e5g

Philanthro-Capitalism, Past and Present: The Rockefeller Foundation and now The Gates Foundation Set the International Global Health Agenda

Introduction

International health philanthropy, American style, is back. Almost exactly a century after the Rockefeller Foundation began to use John D. Rockefeller‗s colossal oil profits to stake a preeminent role in shaping the institutions, ideologies, and practices of international health (as well as medicine, education, social sciences, agriculture, and science), the Bill and Melinda Gates Foundation has emerged as the current era‗s most influential global health (and education, development, and agriculture) agenda-setter. The high profile of its eponymous software magnate founder and his wife, coupled with the Foundation‗s big-stakes approach to grant-making and ―partnering,‖ has made it a de facto leader in the global health field. Each of these two über-powerful foundations emerged at a critical juncture in the history of international/global health.

Each was started by the richest, most ruthless, and innovative capitalist of his day. Rockefeller and Gates alike fended off public opprobrium for their cutthroat monopolistic business practices , and both have been subject to uneven doses of adulation (for example on the C 19er of Time magazine) and skepticism regarding their philanthropic motives . Both foundations have focused on generating and applying new knowledge. One appeared when the international health field was in gestation; the other as it faced midlife crisis. One sought to establish health cooperation as a legitimate sphere for

(inter)governmental action, creating, largely from scratch, the principles, practices, and key institutions of the international health field; the other challenges the leadership and capacity of public multilateral agencies, pushing ahead an overlapping global health governance arrangement with a huge role allotted for the private sector. Both foundations (and their founders) were/are deeply political animals, all the while claiming the technical and purportedly neutral scientific bases of their efforts .

Philanthro-Capitalism and the Global Health Agenda: What Role for Scientists?

Clearly, as these many examples demonstrate, capitalism trumps the love of humankind (the dictionary definition of philanthropy, from its Greek, via late Latin, origins), making Philanthro-Capitalism an oxymoronic enterprise indeed. The pivotal, even nefarious, role it has come to play in international/global health in different eras draws from a series of nested factors: gargantuan resources enabled by profiteering of titanic proportions—amidst relentless ideological assaults on democratically-driven redistributive approaches—all contextualized by a pro-corporate geopolitical climate within still dominant (if declining) U.S. global capitalism. And recall that the very essence of (U.S.) philanthropy is a brazen system of undemocratic decision making by self-designated mega-donors

--http://archive.wphna.org/wp-content/uploads/2015/04/2014-11-Hypothesis-Anne-Emanuelle-Birn-Rockefeller-and-Gates.pdf

Gates' Eugenics Hides Behind Philanthropy: The Real Agenda of the Gates Foundation

Introduction

"You're trying to find the places where the money will have the most leverage, how you can save the most lives for the dollar, so to speak," Pelley remarked. "Right. And transform the societies," Gates replied.

In 2009 the self-designated "Good Club" – a gathering of the world's wealthiest people whose collective net worth then totaled some $125 billion – met behind closed doors in New York City to discuss a coordinated response to threats posed by the global financial crisis. Led by Bill Gates, Warren Buffett, and David Rockefeller, the group resolved to find new ways of addressing sources of discontent in the developing world, in particular "overpopulation" and infectious diseases. (2) The billionaires in attendance committed to massive spending in areas of interest to themselves, heedless of the priorities of national governments and existing aid organizations.

Details of the secret summit were leaked to the press and hailed as a turning point for Big Philanthropy. Traditional bureaucratic foundations like Ford, Rockefeller, and Carnegie were said to be giving way to "Philanthro-Capitalism," a muscular new approach to charity in which the presumed entrepreneurial skills of billionaires would be applied directly to the world's most pressing challenges:

Today's Philanthro-Capitalists see a world full of big problems that they, and perhaps only they, can and must put right. … Their philanthropy is "strategic," "market conscious," "impact oriented," "knowledge based," often "high engagement," and always driven by the goal of maximizing the "leverage" of the donor's money. … Philanthrocapitalists are increasingly trying to find ways of harnessing the profit motive to achieve social good.

Wielding "huge power that could reshape nations according to their will," billionaire donors would now openly embrace not only the market-based theory, but also the practices and organizational norms, of corporate capitalism. Yet the overall thrust of their charitable interventions would remain consistent with longstanding traditions of Big Philanthropy, as discussed below:

I. The world's largest private foundation

"A new form of multilateral organization"

The most prominent of the Philanthro-Capitalists is Bill Gates, co-founder of Microsoft Corp. and as of this writing the richest man in the world. (Despite the carefully cultivated impression that Gates is "giving away" his

fortune to charity, his estimated net worth has increased every year since 2009 and now amounts to $72 billion. (6) Gates owes his fortune not to making technological contributions but to acquiring and enforcing a fabulously lucrative monopoly in computer operating systems:

> Microsoft's greatest strength has always been its monopoly position in the PC chain. Its exclusionary licensing agreement with PC manufacturers mandated a payment for an MS-DOS license whether or not a Microsoft operating system was used. … By the time the company settled with the Justice Department in 1994 over this illegal arrangement, Microsoft had garnered a dominant market share of all operating systems sold.(7)

Microsoft employs the standard repertoire of business strategies in defense of its monopoly power – preferential pricing, lawsuits, acquisitions of competitors, lobbying for patent protection – but relies ultimately, like other US-based monopolies, on the dominant position of the US worldwide. As former US Secretary of Defense William Cohen observed in 1999, "the prosperity that companies like Microsoft now enjoy could not occur without having the strong military that we have." (8)

Gates remains chairman of Microsoft but now devotes the bulk of his time to running The Bill and Melinda Gates Foundation (BMGF), the largest private foundation in the world and easily the most powerful. With an endowment of $38 billion, BMGF dwarfs once-dominant players such as Ford ($10 billion), Rockefeller ($3 billion), and Carnegie ($2.7 billion). (9) These elite charitable funds are attractive to the super-rich not only as alternative channels of influencing policy, but also as a legal means of tax avoidance. Under US law, investments in charitable foundations are tax-free; moreover, investors are not required to sell their stock positions and may continue to vote their shares without restriction. (10) By sheltering foundations, the US Treasury effectively co-finances the activities of BMGF and its investors, supplying a substantial part of the "leverage" lauded above.

Even in a field dominated by the world's richest, the Gates Foundation has acquired a reputation for exceptional high-handedness. It is "driven by the interests and passions of the Gates family," evasive about its financials, and

accountable to no one except its founder, who "shapes and approves foundation strategies, advocates for the foundation's issues, and sets the organization's overall direction." (11)

Gates' approach to charity is presumably rooted in his attitude toward democracy:

The closer you get to [Government] and see how the sausage is made, the more you go, oh my God! These guys don't even actually know the budget. … The idea that all these people are going to vote and have an opinion about subjects that are increasingly complex – where what seems, you might think … the easy answer [is] not the real answer. It's a very interesting problem. Do democracies faced with these current problems do these things well? (12)

The Gates charitable empire is vast and growing. Within the US, BMGF focuses primarily on "education reform," providing support for efforts to privatize public schools and subordinate teachers' unions. Its much larger international divisions target the developing world and are geared toward infectious diseases, agricultural policy, reproductive health, and population control. In 2009 alone, BMGF spent more than $1.8 billion on global health projects. (13)

The Gates Foundation exercises power not only via its own spending, but more broadly through an elaborate network of "partner organizations" including non-profits, government agencies, and private corporations. As the third largest donor to the UN's World Health Organization (WHO), it is a dominant player in the formation of global health policy. (14) It orchestrates vast elaborate public-private partnerships – charitable salmagundis that tend to blur distinctions between states, which are at least theoretically accountable to citizens, and profit-seeking businesses that are accountable only to their shareholders. For example, a 2012 initiative aimed at combatting neglected tropical diseases listed among its affiliates USAID, the World Bank, the governments of Brazil, Bangladesh, UAE et al., and a consortium of 13 drug firms comprising the most notorious powers in Big Pharma, including Merck, GlaxoSmithKline, and Pfizer. (15)

BMGF is the prime mover behind prominent "multi-stakeholder initiatives" such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, and the GAVI Alliance (a "public-private partnership" between the World Health Organization and the vaccine industry). Such arrangements allow BMGF to leverage its stake in allied enterprises, much as private businesses enhance power and profits through strategic investment schemes. The Foundation also intervenes directly in the agendas and activities of national governments, ranging from its financing of the development of municipal infrastructure in Uganda, (16) to its recently announced collaboration with the Indian Ministry of Science to "Reinvent the Toilet." (17) At the same time the Foundation supports NGOs that lobby governments to increase spending on the initiatives it sponsors. (18)

The Gates operation resembles nothing so much as a massive, vertically integrated multinational corporation (MNC), controlling every step in a supply chain that reaches from its Seattle-based boardroom, through various stages of procurement, production, and distribution, to millions of nameless, impoverished "end-users" in the villages of Africa and South Asia. Emulating his own strategies for cornering the software market, Gates has created a virtual monopoly in the field of public health. In the words of one NGO official, "[y]ou can't cough, scratch your head or sneeze in health without coming to the Gates Foundation." (19) The Foundation's global influence is now so great that former CEO Jeff Raikes was obliged to declare: "We are not replacing the UN. But some people would say we're a new form of multilateral organization." (20)

II. Foundations and imperialism

When those who have aggressively established and maintained monopolies in order to accumulate vast capital turn to charitable activities, we need not assume their motives are humanitarian.(21) Indeed, on occasion these 'philanthropists' define their aims more bluntly as making the world safe for their kind. In a letter published on the Foundation's website, Bill Gates invokes "the rich world's enlightened self-interest" and warns that "[i]f societies can't provide for people's basic health, if they can't feed and educate people, then

their populations and problems will grow and the world will be a less stable place." (22)

The pattern of such 'philanthropic' activities was set in the US about a century ago, when industrial barons such as Rockefeller and Carnegie set up the foundations that bear their names, to be followed in 1936 by Ford. As Joan Roelofs has argued, (23) during the past century large-scale private philanthropy has played a critical worldwide role in ensuring the hegemony of neoliberal institutions while reinforcing the ideology of the Western ruling class. Interlocking networks of foundations, foundation-sponsored NGOs, and US government institutions like the National Endowment for Democracy (NED) – notorious as a "pass-through" for CIA funds – work hand-in-hand with imperialism, subverting people-friendly states and social movements by co-opting institutions deemed helpful to US global strategy. In extreme but not infrequent cases, foundations have actively collaborated in regime change ops managed by US intelligence. (24)

The role of Big Philanthropy, however, is broader. Even seemingly benign endeavors by foundations, such as the fight against infectious diseases, can best be understood when located in their specific historical and social contexts. Recall that schools of tropical medicine were established in and the US in the late 19th Century with the explicit goal of increasing the productivity of colonized laborers while insuring the safety of their white overseers. As a journalist wrote in 1907:

Disease still decimates native populations and sends men home from the tropics prematurely old and broken down. Until the white man has the key to the problem, this blot must remain. To bring large tracts of the globe under the white man's rule has a grandiloquent ring; but unless we have the means of improving the conditions of the inhabitants, it is scarcely more than an empty boast. (25)

Precisely this reasoning underlay the formation of the Rockefeller Foundation, which was incorporated in 1913 with the initial goal of eradicating

hookworm, malaria, and yellow fever. (26) In the colonized world public health measures encouraged by Rockefeller's International Health Commission yielded increases in profit extraction, as each worker could now be paid less per unit of work, "but with increased strength was able to work harder and longer and received more money in his pay envelope." (27) In addition to enhanced labor efficiency – which was not necessarily a critical challenge to capital in regions where vast pools of underemployed labor were available for exploitation – Rockefeller's research programs promised greater scope for future US military adventures in the Global South, where occupying armies had often been hamstrung by tropical diseases. (28)

As Rockefeller expanded its international health programs in concert with US agencies and other organizations, additional advantages to the imperial core were realized. Modern medicine advertised the benefits of capitalism to "backward" people, undermining their resistance to domination by imperialist powers while creating a native professional class increasingly receptive to neocolonialism and dependent on foreign largesse. Rockefeller's president observed in 1916: "[F]or purposes of placating primitive and suspicious peoples medicines have some advantages over machine guns." (29)

In the aftermath of World War II, public health philanthropy became closely aligned with US foreign policy as neocolonialism embraced the rhetoric, if not always the substance, of "development." Foundations collaborated with the US Agency for International Development (USAID) in support of interventions aimed at increasing production of raw materials while creating new markets for Western manufactured goods. A section of the US ruling class, represented most prominently by Secretary of State George Marshall, argued that "increases in the productivity of tropical labor would require investments in social and economic infrastructure including greater investments in public health." (30)

Meanwhile, the seminal Gaither Report, commissioned in 1949 by the Ford Foundation, had charged Big Philanthropy with advancing "human welfare" in order to resist the "tide of Communism … in Asia and Europe." (31) By 1956, a report to the US president by the International Development

Administration Board openly framed public health assistance as a tactic in aid of Western military aggression in Indochina:

[A]reas rendered inaccessible at night by Viet Minh activity, during the day welcomed DDT-residual spray teams combating malaria. … In the Philippines, similar programs make possible colonization of many previously uninhabited areas, and contribute greatly to the conversion of Huk terrorists to peaceful landowners. (32)

For a time, therefore, Western philanthropy worked to shape public health systems in poor countries, sometimes condescending to relinquish control of infrastructure and trained personnel to national health ministries. (33) Although actual investment in Third World healthcare was meager by comparison with the extravagant promises of Cold War rhetoric, some response to health crises in poor countries was deemed necessary in the context of the postwar struggle for "hearts and minds."

The fall of the Soviet Union ushered in the present phase of public health philanthropy, characterized by the Western demand for "global health governance" – purportedly as a response to the spread of communicable diseases accelerated by globalization. Health has been redefined as a security concern; the developing world is portrayed as a teeming petri dish of SARS, AIDS, and tropical infections, spreading "disease and death" across the globe (34) and requiring Western powers to establish centralized health systems designed to "overcome the constraints of state sovereignty." (35) Imperial interventions in the health field are justified in the same terms as recent "humanitarian" military interventions: "[N]ational interests now mandate that countries engage internationally as a responsibility to protect against imported health threats or to help stabilize conflicts abroad so that they do not disrupt global security or commerce." (36)

Providing support for national healthcare operations is no longer on the agenda; to the contrary – in keeping with structural adjustment programs that have required ruinous disinvestment in public health throughout the developing world (37) – health ministries are routinely bypassed or compromised via "public-private partnerships" and similar schemes. As

national health systems are hollowed out, health spending by donor countries and private foundations has risen dramatically. (38) Indeed, the US-based Council on Foreign Relations envisions a withering away of state-sponsored healthcare delivery, to be replaced by a supranational regime of "new legal frameworks, public-private partnerships, national programs, innovative financing mechanisms, and greater engagement by nongovernmental organizations, philanthropic foundations, and multinational corporations." (39)

The exemplar of philanthropy in the era of global health governance is the Gates Foundation. Vastly endowed, essentially unaccountable, unencumbered by respect for democracy or national sovereignty, floating freely between the public and private spheres, it is ideally positioned to intervene swiftly and decisively on behalf of the interests it represents. As Bill Gates remarked, "I'm not gonna get voted out of office." (40) Close working relationships with UN, US and EU institutions, as well as powerful multinational corporations, give BMGF an extraordinary capability to harmonize complex overlapping agendas, ensuring that corporate and US ambitions are simultaneously advanced. To better understand how BMGF operates and in whose interests, it is worth looking closely at the Foundation's global vaccine programs, where until recently the bulk of its money and muscle was brought to bear.

III. Gates and Big Pharma

"Guinea pigs for the drugmakers"

Despite annual revenues approaching $1 trillion, the global pharmaceutical industry has lately experienced a critical decline in the rate of profit, for which it lays most of the blame on regulatory requirements. A US think tank has estimated the cost of new drug development at $5.8 billion per drug, of which 90 per cent is incurred in Phase III clinical trials mandated by the US Food and Drug Administration and similar agencies in Europe. (41) (These are tests administered to large groups of human subjects in order to confirm the effectiveness and monitor the side effects of new vaccines and other medicines.) The international business consulting firm McKinsey & Company called the situation "dramatic" and urged Big Pharma executives to

"envision responses that go well beyond simply tinkering with the cost base" – primarily the relocation of clinical trials to emerging markets, where drug safety testing is seen as relatively cheap, speedy, and lax. (42)

It is in this specific context that BMGF's intervention in the distribution of certain vaccines and contraceptives must be seen. Heavily invested in Big Pharma, (43) the Foundation is well positioned to facilitate pharmaceutical R&D strategies tailored to the realities of the developing world, where "[t]o speed the translation of scientific disC 19ery into implementable solutions, we seek better ways to evaluate and refine potential interventions—such as vaccine candidates—before they enter costly and time-consuming clinical trials." (44) In plain language, BMGF promises to assist Big Pharma in its efforts to circumvent Western regulatory regimes by sponsoring cut-rate drug trials in the periphery.

The instruments of this assistance are Gates-controlled institutions like the GAVI Alliance, the Global Health Innovative Technology Fund, and the Program for Appropriate Technology in Health (PATH) – public-private partnerships purportedly devoted to saving Third World lives. Notionally independent but so heavily funded by Gates as to function as virtual arms of the Foundation, these organizations began to conduct large-scale clinical trials in Africa and South Asia in the mid-2000s. (45)

Africa soon experienced an "unprecedented increase in health research involving humans" who were typically "poverty-stricken and poorly educated" (46) ; the results were predictably lethal. In 2010 the Gates Foundation funded a Phase III trial of a malaria vaccine developed by GlaxoSmithKline (GSK), administering the experimental treatment to thousands of infants across seven African countries. Eager to secure the WHO approval necessary to license the vaccine for global distribution, GSK and BMGF declared the trials a smashing success, and the popular press uncritically reproduced the publicity. (47) Few bothered to look closely at the study's fine print, which revealed that the trials resulted in 151 deaths and caused "serious adverse effects" (e.g., paralysis, seizures, febrile convulsions) in 1048 of 5949 children aged 5-17 months. (48) Similar stories emerged in the wake of the Gates-funded MenAfriVac campaign

in Chad, where unconfirmed reports alleged that 50 of 500 children forcibly vaccinated for meningitis later developed paralysis. (49) Citing additional abuses, a South African newspaper declared: "We are guinea pigs for the drugmakers." (50)

It was in India, however, that the implications of BMGF's collaboration with Big Pharma first rose to widespread public attention. In 2010 seven adolescent tribal girls in Gujarat and Andhra Pradesh died after receiving injections of HPV (Human Papilloma Virus) vaccines as part of a large-scale "demonstrational study" funded by the Gates Foundation and administered by PATH. (51) The vaccines, developed by GSK and Merck, were given to approximately 23,000 girls between 10 and 14 years of age, ostensibly to guard against cervical cancers they might develop in old age.

Extrapolating from trial data, Indian physicians later estimated that at least 1,200 girls experienced severe side effects or developed auto-immune disorders as a result of the injections. (52) No follow-up examinations or medical care were offered to the victims. Further investigations revealed pervasive violations of ethical norms: vulnerable village girls were virtually press-ganged into the trials, their parents bullied into signing consent forms they could not read by PATH representatives who made false claims about the safety and efficacy of the drugs. In many cases signatures were simply forged. (53)

An Indian Parliamentary Committee determined that the Gates-funded vaccine campaign was in fact a large-scale clinical trial conducted on behalf of the pharmaceutical firms and disguised as an "observational study" in order to outflank statutory requirements. (54) The Committee found that PATH had "violated all laws and regulations laid down for clinical trials by the government" in a "clear-cut violation of human rights and a case of child abuse." (55) The Gates Foundation did not trouble to respond to the findings but issued an annual letter calling for still more health-related R&D in poor countries and reaffirming its belief in "the value of every human life." (56)

Making Markets

By thrusting the HPV vaccine on India, The Gates Foundation was not merely facilitating low-cost clinical trials but was also assisting in the creation of new markets for a dubious and underperforming product. Merck's version of the vaccine, called Gardasil, was introduced in 2006 in conjunction with a high-powered marketing campaign that generated $1.5 billion in annual sales (57) ; the vaccine was named "brand of the year" by Pharmaceutical Executive for "building a market out of thin air." (58) Aided by enthusiastic endorsements from the medical establishment, Merck at first persuaded Americans that Gardasil could protect their daughters from cervical cancer. In fact the vaccine was of questionable efficacy:

The relationship between [HPV] infection at a young age and development of cancer 20 to 40 years later is not known. … The virus does not appear to be very harmful because almost all HPV infections are cleared by the immune system. [S]ome women may develop precancerous cervical lesions and eventually cervical cancer. It is currently impossible to predict in which women this will occur and why. (59)

The prestigious Journal of the American Medical Association in 2009 openly questioned whether the vaccine's risks outweighed the potential benefits. (60) As word of Gardasil's defects emerged, American and European women began to decline the vaccine, and by 2010 Fortune Magazine declared Gardasil a "marketplace dud" as year-over-year sales fell by 18 percent. (61) GSK's copycat HPV vaccine, Cervarix, experienced a comparable sales trough.

Billions in profits and capitalization were at stake. At this stage the Gates Foundation stepped in. Its principal tool was the GAVI Alliance, launched by BMGF in 2000 with the "explicit goal to shape vaccine markets." (62) GAVI was charged with co-financing vaccine purchases with Third World public health ministries, meanwhile "finding the type of large-scale funding needed to sustain long-term immunization programs" and "laying the foundations that will allow governments to continue immunization programs long after GAVI support ends. (63) In essence, BMGF would buy up stockpiled drugs that had failed to create sufficient demand in the West, press them on the periphery at a

discount, and lock in long-term purchase agreements with Third World governments.

In 2011 GAVI held a highly publicized board meeting in Dhaka where, with the enthusiastic endorsement of UN Secretary General Ban ki-Moon, it announced a worldwide campaign to introduce HPV vaccines to developing countries: "If [developing] countries can demonstrate their ability to deliver the vaccines, up to two million women and girls in nine countries could be protected from cervical cancer by 2015." (64) GSK adopted a "Global Vaccine Availability Model" involving tiered pricing to permit "transition[ing] into poorer countries with the help of 'partners' such as UNICEF, the World Health Organization, and the Global Alliance for Vaccines and Immunization." (65) Meanwhile PATH was rushing to complete a large-scale, five-year long project "to generate and disseminate evidence for informed public sector introduction of HPV vaccines" in India, Uganda, Peru and Vietnam. An Indian Parliamentary report observed: "all these countries have state-funded national vaccine immunization programs, which if expanded to include Gardasil, would mean tremendous financial benefit to the … manufacturer." (66)

By FYE 2012, Merck was able to report a 35 percent jump in worldwide Gardasil sales, reflecting inter alia "favorable performance in Japan and the emerging markets," where "sales growth is being driven by vaccines." (67) Evidently, a drug rightly deemed suspect by Americans would be good enough for women in the developing world.

Other dangerous drugs that failed to gain a toehold in Western markets have received similar attention from the Gates Foundation. Norplant, a subcutaneous contraceptive implant that effectively sterilizes women for as long as five years, was pulled from the US market after 36,000 women filed suit over severe side effects undisclosed by the manufacturer, including excessive menstrual bleeding, headaches, nausea, dizziness and depression. (68) Slightly modified and rebranded as Jadelle, the same drug is now being heavily promoted in Africa by USAID, the Gates Foundation, and its affiliates. A recent article on the Gates-sponsored website Impatient Optimists elides its dangers and disingenuously states that the drug "never gained traction" in the

US because inserting and removing the device was "cumbersome." With Gates Foundation support, however, Jadelle "has played a pivotal role in bringing implants to the developing world" and is soon to be complemented by a second Norplant clone, Merck's Implanon. (69)

An equally risky contraceptive, Pfizer's Depo-Provera, recently received the Gates Foundation imprimatur for distribution to poor women worldwide. In the US and India feminists fought against approval of the injectable drug for decades due to its alarming list of side effects, including "infertility, irregular bleeding, decreased libido, depression, high blood pressure, excessive weight gain, breast tenderness, vaginal infections, hair loss, stomach pains, blurred vision, joint pain, growth of facial hair, acne, cramps, diarrhea, skin rash, tiredness, and swelling of limbs" (70) as well as potentially irreversible osteoporosis. (71)

After the US Food and Drug Administration succumbed to industry pressure and granted approval in 1992, studies found a marked racial disparity in Depo-Provera prescriptions between white and African American women, leading to charges that "this form of long-acting provider-controlled birth control is routinely given to women of color in order to deny them the ability to control their own reproduction."(72) White American and European women, by contrast, receive the drug only rarely and typically as a treatment for endometriosis, greatly limiting its commercial potential in the West.

Hence Pfizer stands to benefit enormously from a Gates-sponsored program, announced with much fanfare at the 2012 London Summit on Family Planning, to distribute the drug to millions of women in South Asia and sub-Saharan Africa by 2016: (73)

You do the numbers: If 120 million new women users chose Depo-Provera, at an estimated average cost between $120-$300 per woman annually, that works out to $15 billion to $36 billion in new sales annually, a nice payoff from leveraging $4 billion in research money. (74)

Foundation publicity suggests that its aggressive backing of a discredited drug is merely a response to appeals from poor women. "Many [African]

women want to use injectable contraceptives but simply cannot get access to them," claimed PATH President and CEO Steve Davis. (75) Reproductive rights activist Kwame Fasu disagrees: "No African woman would agree to being injected if she had full knowledge of the contraceptives' dangerous side effects." (76)

Iv. A Broader Agenda

Behind BMGF's coordinated interventions in pharmaceuticals, agriculture, population control, and other putatively philanthropic concerns lies a broader agenda. In a recent interview Bill Gates briefly strayed off-message to warn of "huge population growth in places where we don't want it, like Yemen and Pakistan and parts of Africa." (77) His use of the majestic plural here is revealing: in spite of much rhetoric about "empowering poor people," the Foundation is fundamentally concerned with reshaping societies in the context of ruling-class imperatives.

The central thrust of current imperialist strategy involves increasingly direct intervention in the developing countries/Third World, ranging from internal destabilization to regime change to outright military occupation. This is evidenced by recent wars of conquest in Iraq and Libya, multiple programs of destabilization and proxy warfare throughout the Middle East and North Africa, and the integration of African Union military forces into the framework of AFRICOM. Military aggression undergirds a redoubled effort to seize control of raw materials in developing countries, in particular oil and strategic mineral resources in the African continent. Big Philanthropy's more aggressive interventions in the public health systems of the Third World reflect and complement this strategy.

Meanwhile, the capitalist core is pursuing an energetic program of what David Harvey has called "accumulation by dispossession," leading to "a rapid and large movement of foreign capital taking control over huge tracts of land—mainly in Africa, Southeast Asia, and Latin America—by either outright purchase or by long-term leases and removal of peasant farmers from the land." (78) This process is facilitated in multiple ways by the activities of the

Gates Foundation. What follows is an attempt to summarize the Gates agenda in a few broad strokes.

"Land Mobility" Not Land Reform

Hunger, claims the Gates Foundation website, is rooted in "population growth, rising incomes, dwindling natural resources, and a changing climate," and is best addressed by enhancing agricultural productivity. (79) Unmentioned is the fact that per capita food production has been trending upward for decades and remains at historic highs, (80) meaning that hunger is an issue of unequal distribution rather than inadequate productivity. Extensive scholarship shows also that food insecurity has been greatly exacerbated over recent decades by massive dispossession of small farmers, depriving millions of their livelihoods. (81) Contra Gates, the food crisis is not one of "rising incomes" but of vanishing incomes.

Although Foundation publicity pays lip service to the idea of sustainable smallholder agriculture, in fact its initiatives are uniformly directed toward high-tech, high-yield farming methods – much like the "Green Revolution" technologies that proved ultimately ruinous for rural peasantries beginning in the 1960s. (82) Gates works closely with agribusiness giant Monsanto through organizations like the Alliance for a Green Revolution in Africa (AGRA), which steers billions in grant money primarily to biotech and GMO research. (83) The Foundation has also thrown its weight behind a revival of Grameen-style micro banking schemes, which transpired during the 2000s to be a debt trap leading to dispossession of rural families. (84)

Far from empowering small farmers, BMGF's efforts envision the exit of "inefficient" small farmers from their land – a process euphemistically termed "land mobility" – as revealed by an internal memo leaked to the press in 2008:

In order to transition agriculture from the current situation of low investment, low productivity and low returns to a market-oriented, highly-productive system, it is essential that supply (productivity) and demand (market access) expand together… [this] involves market-oriented farmers operating

profitable farms that generate enough income to sustain their rise out of poverty. Over time, this will require some degree of land mobility and a lower percentage of total employment involved in direct agricultural production. (85)

The impact of these policies on small farmers and their families is disastrous. As Fred Magdoff recently explained, "the world capitalist economy is [no longer] able to provide productive employment for the huge numbers of people losing their lands. Thus the fate of those migrating to cities or other countries is commonly to live in slums and to exist precariously within the 'informal' economy. (86)

Indeed, the Foundation's agricultural policy strikingly resembles what Samir Amin describes as the logical outcome of subjecting agriculture to the same market principles as any other branch of production: 20 million industrial farmers producing the world's food supply in place of today's three billion peasants. (87) As Amin observes:

The conditions for the success of such an alternative would include: (1) the transfer of important pieces of good land to the new capitalist farmers (and these lands would have to be taken out of the hands of present peasant populations); (2) capital (to buy supplies and equipment); and (3) access to the consumer markets. Such farmers would indeed compete successfully with the billions of present peasants. But what would happen to those billions of people? (88)

Amin's analysis chimes with the Gates Foundation memo quoted above, and there is reason to believe that BMGF is already contemplating strategies for coping with the "surplus" population that the processes of accumulation and dispossession are generating.

Population Control Not Redistribution

In a 2012 Newsweek profile, Melinda Gates announced her intention to get "family planning" back on the global agenda and made the dubious claim that African women were literally clamoring for Depo-Provera as a way of hiding contraceptive use from "unsupportive husbands." (89) Boasting that a decision "likely to change lives all over the world" had been hers alone, she

announced that the Foundation would invest $4 billion in an effort to supply injectable contraceptives to 120 million women – presumably women of color – by 2020. It was a program so ambitious that some critics warned of a return to the era of eugenics and coercive sterilization. (90)

Bill Gates, at one time an avowed Malthusian “at least in the developing countries” (91) is now careful to repudiate Malthus in public. Yet it is striking that Foundation publicity justifies not only contraception, but every major initiative in the language of population control, from vaccination (“When children survive in greater numbers, parents decide to have smaller families”) (92) to primary education (“[G]irls who complete seven years of schooling will marry four years later and have 2.2 fewer children than girls who do not complete primary school.”) (93)

In a 2010 public lecture, Bill Gates attributed global warming to “overpopulation” and touted zero population growth as a solution achievable “[i]f we do a really great job on new vaccines, health care, and reproductive health services.” (94) The argument is disingenuous: As Gates certainly knows, the poor people who are the targets of his campaigns are responsible for no more than a tiny percentage of the environmental damage that underlies climate change. The economist Utsa Patnaik has demonstrated that when population figures are adjusted to account for actual per capita demand on resources, e.g., fossil fuels and food, the greatest “real population pressure” emanates not from India or Africa, but from the advanced countries. (95) The Gates Foundation is well aware of this imbalance and works not to redress it but to preserve it – by blaming poverty not on imperialism but on unrestrained sexual reproduction “in places where we don’t want it.”

From Malthus to the present day, the myth of overpopulation has supplied reliable ideological C 19er for the ruling class as it appropriates ever greater shares of the people’s labor and the planet’s wealth. As argued in Aspects No. 55, “Malthus’s heirs continue to wish us to believe that people are responsible for their own misery; that there is simply not enough to go around; and to ameliorate that state of wretchedness we must not attempt to alter the ownership of social wealth and redistribute the social product, but instead

focus on reducing the number of people."96 In recent years BMGF's publicity apparatus, exploiting Western alarm about "climate change," has helped create a resurgence of the overpopulation hysteria last experienced during the 1970s in the wake of Paul Erlich's bestseller The Population Bomb. (97)

Yet the sheer scale of BMGF's investment in "family planning"" suggests that its ambitions reach beyond mere propaganda. In addition to the multibillion dollar contraception distribution program discussed previously, BMGF provides research support for the development of new high-tech, long-lasting contraceptives (e.g., an ultrasound sterilization procedure for men as well as "non-surgical female sterilization"). Meanwhile the Foundation aggressively lobbies Third World governments to spend more on birth control and supporting infrastructure. (98) while subsidizing steep cuts in the price of subcutaneous contraceptives. (99)

These initiatives lie squarely within the traditions of Big Philanthropy. The Rockefeller Foundation organized the Population Council in 1953, predicting a "Malthusian crisis" in the developing world and financing extensive experiments in population control. These interventions were enthusiastically embraced by US government policymakers, who agreed that "the demographic problems of the developing countries, especially in areas of non-Western culture, make these nations more vulnerable to Communism." (100) Foundation research culminated in an era of "unrestrained enthusiasm for government-sponsored family planning" by the 1970s. (101) Less discussed but amply documented is the consistent support for eugenics research by US-based foundations, dating from the 1920s, when Rockefeller helped found the German eugenics program that undergirded Nazi racial theories, (102) through the 1970s, when Ford Foundation research helped prepare the intellectual ground for a brutal forced sterilization campaign in India. (103)

Why have foundations invested so persistently in actual technologies and campaigns for population reduction? In the absence of a definitive explanation, two possibilities are worth pondering:

Gates and his billionaire associates may well share Dean Acheson's view – famously ridiculed by Mao Zedong – that population growth engenders

revolutions by "creating unbearable pressure on the land." (104) A more recent expression of this idea, contained in the report of the US Vice President's Task Force on Combatting Terrorism, is that "population pressures create a volatile mixture of youthful aspirations that when coupled with economic and political frustrations help form a large pool of potential terrorists." (105) Thus BMGF likely sees population control as a security imperative, in keeping with its fear of a "less stable" world and reflecting the philosophy of global health governance. (106)

Population control is, in another sense, one of the instruments of social control. It extends ruling-class jurisdiction more directly to the personal sphere, aiming at "full-spectrum dominance" of the developing world. Like laws regulating marriage and sexual behavior, such interventions in the reproduction of labor power are not essential to capitalists but remain desirable as a means of exercising ruling class hegemony over every aspect of the lives of the working people. Whereas the ideology of population control is intended to turn attention away from the existing distribution of wealth and income that causes widespread want, population control as such directly targets the bodies and dignity of poor people, conditioning them to believe that life's most intimate decisions are outside of their competence and control. (107)

The relationship between bourgeois ideology and imperialist practice is dynamic and mutually supportive. As David Harvey has observed: "Whenever a theory of overpopulation seizes hold in a society dominated by an elite, then the non-elite invariably experience some form of political, economic, and social repression." (108) Seen in this light, BMGF's promotion of population control is doubly pernicious because it is cloaked in the language of environmentalism, popular empowerment, and feminism. Melinda Gates may evoke "choice" in support of her family planning initiatives, but in reality, it is not poor women, but a handful of the world's wealthiest people who have presumed to choose which methods of contraception will be delivered, and to whom.

Dependency not Democracy

Speaking off the record, public health officials are scathing about the imperiousness of the Gates Foundation. It is said to be "domineering" and

"controlling," contemptuous of advice from experts, seeking to "divide and conquer" the institutions of global health via "stealth-like monopolization of communications and advocacy.(109) But the high-handedness of the Foundation goes far beyond office politics in Geneva. In general it "has not been interested in health systems strengthening and has rather competed with existing health services." (110) It routinely subverts the health ministries of sovereign nations, either coercing their cooperation or outmaneuvering them via NGO-sponsored field operations that bypass existing infrastructure and personnel.

In particular, the Foundation's emphasis on single-issue, vertically organized interventions tends to undermine community-based primary care, endorsed by the Alma Ata Declaration of 1978 as the model for Third World public health programs. Based implicitly on the "barefoot doctor" program that revolutionized public health in the People's Republic of China, the philosophy of primary care proposed that the people "have a right and duty to participate individually and collectively in the planning and implementation of their health care." (111) In theory, the goal was not only improvement of health as such, but also popular empowerment and genuine democracy at the local level. People would be encouraged to believe that health care was not a gift from Western benefactors but belonged to them as of right.

Although the Chinese model could never be properly implemented in non-socialist countries, Alma Ata inspired various community-based health initiatives in developing countries, achieving some success in lowering infant mortality and raising life expectancy. (112) Today, however, primary care programs worldwide are on the decline due both to the imperatives of structural adjustment programs and to the meddling of US-based foundations. (113) The Gates Foundation, for its part, invariably acts to steer resources away from community-based holistic doctoring and toward single-disease crash programs, controlled by Western NGOs in collaboration with health-related MNCs. Its approach to diarrhea, which kills upwards of one million infants annually, is a case in point.

The procedures necessary to control diarrhea are not mysterious: clean water and adequate sanitation are essential to prevention, while treatment consists of administering oral rehydration salts (ORS) and zinc supplements to afflicted infants. Chinese "barefoot doctors" achieved steep declines in diarrhea mortality from the 1950s through the 1980s by distributing ORS supplies at the village level and educating families on their importance and proper use. (114) Yet while shepherding governments away from investing in the sanitation infrastructure and primary care that have been proven to save lives, BMGF funds and promotes vaccine research, marketing programs administered by NGOs, and "work[ing] with manufacturers and distributors to make ORS and zinc products more attractive to consumers—by improving flavors and repackaging products." (115)

Perhaps Bill Gates, who became rich through the expert marketing of inferior software, really believes that poor mothers can't be relied upon to take an interest in saving their children's lives unless medicines are advertised like Coca-Cola. But BMGF's overall stance toward diarrhea, as toward public health in general, reminds us that the attenuation of Third World democracy is far from unwelcome to the rulers. As the educational theorist Robert Arnove has observed, foundations are at bottom a corrosive influence on a democratic society; they represent relatively unregulated and unaccountable concentrations of power and wealth which buy talent, promote causes, and in effect, establish an agenda of what merits society's attention. They serve as 'cooling-out' agencies, delaying and preventing more radical, structural change. They help maintain an economic and political order, international in scope, which benefits the ruling-class interests of philanthropists. (116)

Charitable activities that undermine democracy and state sovereignty are immensely useful to the ruling class. Robust, effective social programs in developing countries are an impediment to the current imperial agenda of worldwide expropriation; healthy people, in control of their own destinies and invested in the social well-being of their communities, are better equipped to defend their claim to the wealth they possess and produce. Far better, from the

point of view of the Good Club Philanthro-Capitalists, if the world's poorest billions remain wholly dependent on a largesse that may be granted or withdrawn at pleasure.

A Facelift for The Rulers

In the wake of the 2007-08 financial crisis and the subsequent implementation of "austerity" programs worldwide, the super-rich experienced popular anger more directly than at any time since the Great Depression. The masses took to the streets worldwide; the avowedly anti-capitalist Occupy Wall Street movement received extensive and largely favorable press C 19erage; newspaper columnists openly wondered whether reforms might be needed to save capitalism from itself; Capital and The Communist Manifesto returned to bestseller lists. Particularly worrisome to the mega-rich was the extent to which they themselves, rather than vague complaints about "the system," became the focus of discontent. Even relatively well-to-do Americans questioned the power and disproportionate wealth controlled by elites, now commonly identified as "the 1 per cent" or the "1 per cent of the 1 per cent." Confronting widespread hostile scrutiny, the ruling class was in need of a facelift.

BMGF's publicity operation was quick to respond. The Foundation exploited "multiple messaging avenues for influencing the public narrative" including the creation of "strategic media partners" – ostensibly independent news organizations whose cooperation was ensured via the distribution of $25 million in annual grant money. (117) Bill Gates, said to be socially awkward and formerly shy of media attention, was suddenly ubiquitous in the mainstream press. In every interview Gates worked from the same talking points: he had resolved to dedicate "the rest of his life" to assisting the world's poor; to that end he intended to give away his entire fortune; his uncompromising intelligence and business acumen made him uniquely qualified to wring "more bang for the buck" from philanthropic endeavors; he is nevertheless kindhearted and deeply moved by personal encounters with sick and impoverished children; etc. Invariably he told the suspiciously apposite story of his mother's deathbed adjuration: "From those to whom much is given, much is expected." (118) At the same time BMGF expanded its online operations,

using Twitter and Facebook to disseminate pseudoscientific aperçus and heartwarming images to millions of "followers" worldwide. (119)

Gates' willingness to carry the torch for the world's billionaires reflected an understanding that his Foundation plays an important ideological role within the global capitalist system. Apart from the promotion of specific corporate interests and imperialist strategic aims, BMGF's expertly publicized activities have the effect of laundering the enormous concentration of wealth in the hands of a few supremely powerful oligarchs. Through stories of Gates' philanthropy we are assured that our rulers are benevolent, compassionate, and eager to "give back" to the less fortunate; moreover, by leveraging their superior intelligence and technocratic expertise, they are able to transcend the bureaucratic fumblings of state institutions, finding "strategic, market-based solutions" to problems that confound mere democracies. This apotheosis of Western wealth and knowhow works hand-in-hand with an implicit contempt for the sovereignty and competence of poor nations, justifying ever more aggressive imperialist interventions. (120)

Thus the Gates Foundation, like the MNCs it so closely resembles, seeks to manufacture consent for its activities through the manipulation of public opinion. Happily, not everyone is fooled: popular resistance to the designs of Big Philanthropy is mounting. The struggle is broad-based, ranging from the women activists who exposed the criminal activities of PATH in India, to the anti-sterilization activities of African-American groups like The Rebecca Project, to the anti-vaccine agitations in Pakistan following the revelation that the CIA had used immunization programs as C 19er for DNA collection. (121) Surely a worldwide campaign to eradicate the toxic philanthropy and infectious propaganda of the Gates Foundation would be in the best traditions of public health. --https://www.liberationnews.org/real-agenda-gates-foundation/

A Legacy of Eugenics

This is an anthology of my writings and the best I could assemble from other key researchers on the topic of the 2020 C 19 PLANdemic. Jesuit Vatican

lapdogs, Bill Gates, and Anthony Fauci look at humanity as if it were a virus that needs to be eradicated. As Eugenicists representing a long line of Eugenicists, flowing back to Thomas Malthus, Sir Francis Galton, and later Margaret Sanger, followed by a number of prominent socialists such as Sidney and Beatrice Webb, George Bernard Shaw, Havelock Ellis and H. G. Wells, who openly championed Eugenics as a tool of social engineering, they regard most of Mankind as a scourge on the Body of Gaia (New Age Mother Earth). They seek to save an Oligarchical Plutocracy of White Supremacists, themselves and their Technocratic and Illuminati Bloodline Cabal, while inoculating the rest in order to cull out the "useless eater" cancer on The Body of GAIA.

The Priests in White Lab Coats Selling Superstition and Then to Excommunicate the Unclean C 19 Wicked

Public health agencies readily admit that people with weakened immune systems should not be vaccinated.

But the language they use is dodgy and incomplete. The CDC states: "A vaccine should not be administered when a contraindication is present; for example, MMR vaccine should not be administered to severely immunocompromised persons...Severely immunocompromised persons generally should not receive live vaccines..."

No word about killed-virus vaccines. No word about the dangers of vaccine components, such as aluminum and formaldehyde.

But there ae more issues. According to conventional vaccine theory, the injection of a germ stimulates the immune system to mount a response---and this is an effective rehearsal, preparing the immune system to react quickly, later, when the real disease comes along.

But if the recipient of the vaccine has an immune system that is already impaired, how can the "experts" believe the rehearsal will go smoothly? The

recipient's antibody scouts would respond sluggishly. The immune killer cells would fail to carry out their mission of wiping out the germ-invaders in the vaccine.

To use a mechanical analogy, vaccinating people with compromised immune systems is like pumping more efficient fuel into a car to improve its performance, when in fact the car's engine is already disabled.

Worse yet, vaccinating a person whose immune system is weak would overwhelm his body's defenses with injected chemicals and germs, creating dire levels of illness. The rehearsal would be the real thing---and the body would take the punishment.

All right. Now imagine a few billion people receiving a new C 19ID vaccine. Do you seriously think doctors are going to spend time sorting out all these people, to disC 19er whose immune systems are already weak, and shunting them off into the do-not-vaccinate category? Of course, they will not.

No mass vaccination campaign (for example, in Africa) has separated the weak from the strong---and none of those campaigns approached the numbers envisioned for the C 19ID vaccine.

In a C 19ID campaign, people are going to be dropping like flies. And when they do, public health authorities will employ the time-honored strategy of calling them "sudden deaths owing to C 19ID disease."

Furthermore, I'm talking about a conventional vaccine. Two new technologies are in the C 19ID testing pipeline as we speak: DNA and RNA vaccines. They have never been released for public use. DNA technology is actually gene therapy. Genes are injected into the body, and they permanently alter the genetic makeup of the recipient in unknown ways. RNA vaccines would carry the danger of triggering autoimmune reactions, meaning the body basically goes to war against itself.

Pro-vaccine religionists are enthusiastic and militant about bringing a C 19ID vaccine into play, and they want to see it mandated. In their wet dream, a vaccinated person would receive an immunity certificate, enabling him to go

back out into the world, from lockdown. The unvaccinated would face a murkier future.

In this sense, the entire "C 19ID pandemic" is an operation designed for the use of a vaccine. Politically, it is offered up as a forked road into favored status, or a shameful lower-class outlier category, resembling Church excommunication.

"Shun the unclean, the demons and the witches, the unvaccinated. Shun them in all ways. Only through the priests (the men in white coats) will you find rescue and salvation..."

The tactic is as old as the hills. Then and now, the people running it are the ones selling superstition.

--Jon Rappoport

So, What Is the C 19 PLANdemic Really About?

1. Bill Gates' releases the idea of a lethal super virus, real or merely in people's perception.
2. Bill Gates' creates mass hysteria using elite controlled mainstream media outlets on scale never seen before.
3. Bill Gates' demands the quarantine an entire world and get people to DEMAND a Vaccine.
4. Bill Gates' will use a mandatory Quantum Nano Dot Tattoo as Digital Certification of having received the Vaccine. It will be injected inside you so you cannot remove it. The Quantum Dot Tattoo will be sown into your skin with multiple nano needles.
5. The REAL virulent cocktail of "C 19" and other dangerous poisons may be placed in the Gates Vaccine. C 19 was patented in 2004 by the Pirbright Foundation and now, Bill Gates owns the patent. Everybody who gets a C 19 shot, gets injected with the real C 19, as well as other CVes. This compromises the immune system, making 5G EMF radiation more damaging to the respiratory system. There will be a certain amount of deaths from this situation, C 19 will be blamed, and the endless Pandemic continues.

6. Bill Gates' will use mandatory immunization to implant an RFID ID chip (digitized world citizens)
7. Bill Gates' will place in the Vaccine, in addition to various poisons, and 5G interfaceable RFID chip nano tech, is a third nano strand of DNA coated to a billionth of a millimeter of gold, which increases the surface area around the silicon strand for an increase in digitally imparted and encoded information. This creates a third strand of DNA which will, essentially, dehumanize people and inhibit their ability to adhere to internal morals and ethics. It will create a HIVE MIND Population, governed by 5G.
8. Bill Gates' Pandemic Hoax will cause people to lose their ability to understand that they have lost their ability to think on their own. Sound familiar? They will lose independent thought and will be controlled as slave class by the ruling elite through 5G, to serve the Elite.
9. Bill Gates, in conjunction with Elon Musk's elaborate 5G satellite geo-engineering Skynet will direct 5G to track your every move and lock on and effect the contents of the Vaccine in the human body

This Whole Thing is About Gates' Fourth Reich Of Vaccines and Digital Control

1) A Digital World Currency
2) Control by a Scientific Dictatorship Elite
3) Depopulation
4) You Tube and Facebook have appointed themselves as The Gestapo
5) Gates has appointed himself as a hybrid of God and Hitler
6) They are compelling each citizen to rat on each other like the German Stasi
7) The masks are the symbol of compliance and silence in the face of tyranny.
8) Anthony Fauci is Gates' Mad Rabid Dog, Dr. Mengele
9) Truth is now the Enemy of The State
10) Truth Seekers and Critical Thinkers are and The Resistance
11) Death is Good

The Ministry of Truth Governs All in Double Speak:

War is Peace

Freedom is Slavery

Ignorance is Strength

The CV and the Cycle of Legal Eugenics

Here's how this con job goes and although it repeats itself under different names, year after year (AIDS, SARS, Ebola, mad cow etc etc) most of the uninformed public react as programmed, simply because fear is PROVEN to trigger a narrowing of the mind, a lowering of IQ, a stimulation of the child ego (that looks for an adult to save it) and a reflexive obedience toward perceived authority.

The con job goes like this:

Step 1) poison the population purposely to create disease that does not and would never occur naturally

Step 2) parlay the purposely created disease as being caused by something invisible, outside the realm of control or knowledge of the average person

Step 3) create a toxic vaccine or medication that was always intended to further poison the population into an early grave

Step 4) parlay the vaccine or medication poisoning as PROOF the disease, which never existed, is much worse than anticipated

Step 5) increase the initial poisoning, which is marketed as a fake disease, and also increase the vaccine and medication poisoning, to start piling the bodies into the stratosphere

Step 6) repeat as many times as possible upon an uninformed population because killing a population this way (the art of having people line up to kill themselves with poison......known as a "soft kill" method) is the only legal way to make sure such eugenic operations can be executed on mass and in plain sight.

If you do not think fake news, fear and reliance on fabricated authority can make people line up to kill themselves and their own children........you are not paying attention.

Mega-corporation, Amazon, has wrote to inform me that they would not publish my last book, ***Stand or Fall in the C 19 Chess Game***, because they do not allow any books or articles that make reference in any way to C 19, and that the CDC website is the only website in the world allowed to publish information on C 19. We are in the midst of a worldwide censorship about this topic, unparalleled in all of human history. It begs the question, “Why?” And, what are they afraid of? Why are people no longer allowed to talk freely about this topic?

Well, this book explains why. I began writing this book as soon as I realized that the Wuhan situation was about to hit American shores. Now, the entire world is under a Fascist lockdown, and billions are ironically accepting it as the new normal, without questioning or kicking back in anyway.

Benjamin Franklin once said:

"Those who would give up essential Liberty, to purchase a little temporary Safety, deserve neither Liberty nor Safety." I cannot imagine a more apropos statement at this pivotal time in world crisis.

Overnight, the ruling elite have been able to transform the entire world into a kind of Communist Socialist State, economic collapse, and mass unemployment, included. Nevertheless, we are not allowed to talk about it. Hundreds of You Tube videos about C 19 are being taken down by Your Tube, and Facebook is striking down literally thousands of posts and videos. In my opinion, the thing you are most forbidden to talk about is generally The Truth.

This topic is the singularly most important topic in the world right now. The unimaginable pain and suffering which would result for the common person from such a transference of power to the Elite 1% is tantamount to the Satanic Beast System that most know all too well about from Biblical references. But this will be a Technocratic Plutocracy. This will be rule by digital tyranny and surveillance.

We are facing a melding of the books, 1984 and Brave New World, laced with Satanic sadism and mass extermination if we do nothing but submit to this Technocratic Cabal. There is no greater thing to figure out right now in all the world than the real reasons, motivations, intentions, purposes, and agendas behind the current C 19 Pandemic.

This book is primarily and anthology of my writings and the best authors on 5G and C 19 that I could find.

This is the follow-up book to my book, ***Stand or Fall in the C 19 Chess Game***. It involves an analysis of C 19 and its relationship to 5G, including the role of General Artificial Intelligence superstructures as a nodal electromagnetic connective net in this Pandemic Hoax

International Arrest Warrant for The Bill and Melinda Gates Foundation

The grounds for this international arrest warrant include but are not limited to acts of international terrorism through inciting fear into the general public with falsified international medical records, a hoax pandemic, gaslighting the general public, causing mass hysteria, manipulation of the general public through television airways using Communist propaganda, thereby violating Natural Law by subjecting all the people in the world to forced medical experimentation, which violates intangible rights to the people's tangible bodies, waging biological warfare, also to include violating the Law of Armed Conflict by inciting International Martial Law, regulating civilians by placing the

military above all civilian powers, all of which amounts to international war crimes perpetuated by Bill Gates, Melinda Gates, and The Bill & Melinda Gates Foundation, and all associates, known and unknown, as well as violations of numerous Articles within the Universal Declaration of Human Rights (UDHR) and the Law of Nations, to wit.

6 6 6 Number of the Beast Body Interfaced Digital Currency

- Microsoft Patent 060606
- The full patent ID is WO/2020/060606
- Microsoft 3/26/2020 in conjunction with their public ad featuring infamous Satanist Marina Abramovic.

"Human body activity associated with a task provided to a user may be used in a mining process of a cryptocurrency system. A server may provide a task to a device of a user which is communicatively coupled to the server. A sensor communicatively coupled to or comprised in the device of the user may sense body activity of the user.

Body activity data may be generated based on the sensed body activity of the user. The cryptocurrency system communicatively coupled to the device of the user may verify if the body activity data satisfies one or more conditions set by the cryptocurrency system, and award cryptocurrency to the user whose body activity data is verified."

Monitors thoughts, energy, actions, feelings, body movements. Cannot buy, sell, travel, work, or exist without it, implanted in human body.

Total Onslaught: Darkness Rising

As you struggle to understand how we could possibly find ourselves in this pandemic dystopia, pay attention to those who benefit and those who are

persecuted. For example, thousands of dangerous prisoners, rapists, and sex-offenders are being released from prison. Meanwhile, business owners, peaceful protestors, and anyone refusing to comply with draconian, un-Constitutional government edicts are being jailed, banned, and censored. The evidence is clear, evil is rising, and freedom is dying.

Ephesians 6:12 says, "For our struggle is not against flesh and blood, but against the rulers, against the authorities, against the powers of this world's darkness, and against the spiritual forces of evil in the heavenly realms."

Humanity is under assault and our enemy is Satanic evil. The evidence is everywhere. Don't get lost in the shallow false narratives, lies, deceit, and manipulative misinformation. Recognize the liars, frauds, and agents of evil: the Chinese Communist Party, Gates, the Clintons, Soros, Fauci, CDC, WHO, the "DEMONcrat" Party, the mainstream media, and all the politicians responsible for aiding and abetting evil with fear, divisiveness, and submission to their tyrannical policies.

Do not bow to evil. Rise and resist with our prayer, love, and the knowledge that evil's power is powerless before the Lord Jesus Christ. Join with Christian patriots everywhere as we put on all of God's armor, take up the sword of truth, which is God's word, and the shield of faith. Together, we will end this evil uprising, cleanse the demonic deep state from their positions of power, and reclaim our freedoms and our country in the name of God. -- Dr. Jim Meehan

Bill Gates and Richard Branson Are Betting Lab-Grown Meat Might Be the Food Of The Future

Investors like Tyson and Cargill could put 'clean meat' on grocery shelves within three years.

Traditional meat production is ecologically devastating, and a growing world population could make farm-raised animal meat unfeasible by 2050.

Billionaires, including Bill Gates, say there is no way to produce enough meat traditionally to feed the world population of the future.

For lab-grown meat start-ups, going after $50-per-pound foie gras makes as much sense as grocery-store staples like burgers and chicken nuggets.

Vegetarians have long touted the ethical and environmental problems with meat production and consumption. Start-ups such as MosaMeat, JUST and Memphis Meats are tissue-engineering meat in a lab to allow people to enjoy being a carnivore without any of the environmental or ethical hang-ups.

Dubbed clean meat, the efforts are distinct from "fake meat," like the soy protein "chicken" you can find in your grocery store today. Unlike Morningstar or Boca Burgers, clean meat really is meat; it just grows in a lab instead of being part of an animal. But lab-grown meat leads most skeptical diners to think of a big hurdle: taste.

"When they taste the product, they have to have the experience of meat, not the experience of a product that looks like meat and comes close to meat or has the distinct hints of something that looks like meat," said Peter Verstrate, the CEO of MosaMeat. "It just has to be meat."

"The ultimate filter is, 'Does it taste exactly like the meat you're used to?'" said Josh Tetrick, CEO of clean meat start-up JUST, who already tasted success with JUST Mayo.

There are two business-world barometers for clean-meat products that are make-or-break as well: price and scale.

Right now clean meat is much more expensive to produce than traditional meat because of scaling and infrastructure. The land, feed, farmers, slaughterhouses, and transportation are already in place to produce meat from dead animals. Growing clean meat may be more efficient and will require less total marginal costs in the end, but until the systems needed to grow clean meat on a large scale exist, it will be more expensive.

Bill Gates: No way to produce enough meat for 9 billion people

Investors aren't deterred by the challenges, with sustainability forecasts chief among their concerns and motivations. Scientists estimate the world population will reach 9.6 billion by the year 2050. This population will increasingly live in urban areas and have a rising middle class, both of which mean more meat consumption. According to the Food and Agricultural Organization of the United Nations, world food production will need to increase 70 percent. Feeding that many people with traditional meat production will require double the amount of deforestation, which will increase greenhouse-gas emissions by 77 percent.

Bill Gates has invested in lab-grown meat companies, as has Richard Branson. "Raising meat takes a great deal of land and water and has a substantial environmental impact," Gates wrote on his personal blog, Gatesnotes.com, a few years ago. "Put simply, there's no way to produce enough meat for 9 billion people. Yet we can't ask everyone to become vegetarians. That's why we need more options for producing meat without depleting our resources."

https://www.cnbc.com/2018/03/23/bill-gates-and-richard-branson-bet-on-lab-grown-meat-startup.html

Bill and Melinda Gates Foundation Funds Wuhan Institute of Virology, Chinese Academy of Sciences

Experts of Public Health from 10 African Countries Visited WIV, CAS

By the invitation of the Center for Global Public Health (CGPH) of Chinese Center for Disease Control and Prevention, 10 African experts of public health from Ghana, Senegal, South Africa, Zambia, C'te d'Ivoire,

Cameroon, Mozambique, Ethiopia, Uganda and Gabon visited China from November 11th to 21st, 2019. On November 13th, the African experts visited Wuhan Institute of Virology (WIV), Chinese Academy of Sciences (CAS), and visited Wuhan National Biosafety Laboratory of CAS (Wuhan P4 Laboratory).

They learned about the laboratory's construction process, functional layout and key cooperation areas, and communicated with the laboratory team. A consensus was reached by both sides on cooperation in research and development of disease prevention and control, active response to public health emergencies and training of biosafety personnel.

The CGPH was established in August 2016 with the main responsibility of achieving China's global health strategy, implementing the national public health aid mission, and planning and managing international public health cooperation projects.

Through dispatching experts, technical cooperation, emergency response and foreign aid projects, CGPH has been working in the following areas: supporting the construction of Africa CDC, improving public health capacity in Sierra Leone and other African countries, protecting health security in the Belt and Road Initiative, building the capacity of national public health aid teams, and strengthening international cooperation. Since its establishment, CGPH has managed and implemented foreign aid mission assigned by the National Health and Family Planning Commission and the Ministry of Commerce, as well as international cooperation projects funded by the United Kingdom Department for International Development and the Bill & Melinda Gates Foundation.

http://english.whiov.cas.cn/Exchange2016/Foreign_Visits/201811/t20181121_201447.html

The Grand Chessboard of Bill Gates

Bill Gates ticks all the boxes for a key Illuminati "Change Agent":

a. Pervert

b. Crypto-Jew
c. Control Freak
d. Killer

Recently I was contacted by someone who knew an intimate of Bill Gates from the early 1990s, when Gates was in his late 30s. I was given the name of this intimate, and he checked out.

This intimate "was scary, like the kind of scary you talk about. He was very secretive. He was an originator at many tech companies. But basically, he told me Gates did nothing but watch porn all day – and have relations with very deviant women. They found Melinda for him as a C 19er." [The marriage took place in 1994.]

The source continued:

"Basically [the intimate] told me Bill was a heavy porn addict. They used a lot of recreational drugs together. BG also had several deviant sex partners – a sex addiction – and finally the sex with one became such an addiction that it was interfering with his job. A group of friends found a way to get him away from the girl – I guess people were finding out. Between porn and the girlfriends, his family had to find him an upstanding wife – so they arranged for him to meet Melinda at a picnic.

"I am sure you know this, but the BG foundation vaccines have killed tens of thousands of kids in India. [In 2011 alone, the Bill and Melinda Gates' polio vaccine campaign in India caused 47,500 cases of paralysis and death.] The western media does not C 19er it, but it is out there. The foundation worked to develop some "evidence-based tools that help persuade reluctant American parents to vaccinate."

"We can add this all up. He is developing technology to change the weather - you can find his lectures on YouTube. He practically owns Monsanto now, so is developing crop technology (some of these crops harm fertility), and now world vaccine and population reduction programs. BG's family is steeped in the eugenics movement. [His father was President of Planned Parenthood.] Add it up and tell me how that is a good thing. I am no brain surgeon, but it

does not take much to see what is happening. BG and his wife regularly make an appearance at Sacred Heart Catholic Church in Bellevue. Now, that's a laugh."

Control Freak

As my readers know, the world is controlled by a Satanic cult, the Illuminati, which consists of Cabalist Jews who have interbred with other generational Satanists. Their goal is to own and control everything including your mind and soul. (Our political and cultural leaders are their errand boys.) Bill Gates is a prime example of how they execute this agenda using tax-exempt "charitable" foundations. Likely, these people are allowed to attain their wealth on the condition that they will use it for the cause of Satan. (See "Billionaires Pledge Half their Fortunes to Charity")

Here are a few examples of the monolithic control the Illuminati is imposing on society:

Curriculum

The Gates Foundation financed the "Common Core" curriculum which replaces the great works of Western Civilization with books written by Illuminati hacks. Thus, Shakespeare is being replaced by Malcolm Gladwell's ***Tipping Point*** and other books that support drugs, homosexuality, miscegenation, and global warming. Because the Obama administration has made federal funding contingent on adopting this curriculum, 46 states have already signed on.

Population Control:

"Plans are already in place to track births and vaccinations through cell phone technology to register every birth on the planet. Gates claims that the GPS technology would enable officials to track and "remind" parents who do not bring their children in for vaccines. Maintaining that vaccination is key to reducing population growth, Gates disingenuously predicts that "if child mortality can be reduced, parents will have fewer children...."

Control over Food Production

"After the Bill & Melinda Gates Foundation purchased 500,000 shares in Monsanto back in 2010, valued at more than $23 million, it became abundantly clear that this so-called benevolent charity is up to something other than eradicating disease and feeding the world's poor. It turns out that the Gates family legacy has long been one of trying to dominate and control the world's systems, including in the areas of technology, medicine, and now agriculture.

"The Gates Foundation is currently spending billions of dollars in the name of humanitarianism to establish a global food monopoly dominated by genetically-modified (GM) crops and seeds. And based on the Gates family's history, it appears that one of its main goals besides simply establishing corporate control of the world's food supply is to reduce the world's population by a significant amount."

Conclusion

The Gates Foundation "is making great strides to control the world by pretending to help improve and save it."

This is the Illuminati Jewish modus operandi. "Heal the world." When James Wolfensohn was the Head of the World Bank, he had a sign on his desk, "Plutocrat for the Poor." Meanwhile he was robbing them blind. Obviously, these tax-exempt "charitable" foundations are enslaving us, at our expense, and should be abolished.

In the span of my politically conscious life, roughly 50 years from 1963 to the present, I have seen society go from censuring extramarital "illegitimate births" and presenting separate marital beds (on TV) to non-stop sexual filth, occultism and violence. Society has been inducted into a satanic cult by the Illuminati mass media.

Satanists are able to cloak themselves in "truth and goodness" but occasionally they are revealed for what they are: perverts, psychopaths, and megalomaniacs. We are leaving our children a world governed by these monsters.

People often demand that we put a face on the Illuminati. One face ticks all the boxes – Bill Gates.

Special Recognition: Gates' is an "intellectual property thief."

Back in 1998, Micro$oft was indicted by the Federal Justice Dept. for violations of the Sherman Antitrust Act 1890.

The judgment in United States vs M$oft, on November 5, 1999, ruled that Microsoft's dominance of the personal computer operating systems market constituted a monopoly, and that Microsoft had a policy of aggressively undermining all competitors.

The court ordered the breakup of Microsoft into two separate units: one for the operating system, and the other for its software. The ruling was overturned on appeal in 2001.

I remember it was fun watching Gates on the hot seat. Watch him lying his head off in this deposition tape.

--http://abeldanger.blogspot.com/2013/07/bill-gates-porn-addict-days.html

Chapter 6
Lethal Games People Play

The C 19 Viral Load Morning Report

Get ready for the morning announcement about the "C 19 Viral Load Report", told with the pretty voice of Scarlet Johansson.

This could be the near future:

Good morning, this is Samantha Higgins in San Diego at The C 19 Viral Load Morning Report. How are you all doing this morning? Are you remembering to wash your hands and keep at least 6 feet between you and every other human being? The C 19 Viral Load is high in San Diego today due to a variable pressure front and increased smog, but the Sun may give way to rain this evening, with a 10 percent chance of precipitation and a low of 50 degrees. Winds are expected to remain calm at 9 mph, and so no citizens are aloud outside until tomorrow when we expect the Viral Load to diminish.

For your convenience, we will be announcing the **Viral Infection Rate of Amplitude Level= V.I.R.A.L.** through a color-coded system in your **C 19 Fun App,** available at Google Play. To ensure your safety, please lockdown when you see a red level on your app, remain close to home during an orange level, remain in your neighborhood during a yellow level, and travel only within your city limits if a green viral amplitude is given.

This message is courtesy of Central Command. And remember Martial Law will always be enforced for your protection and safety. Please, be respectful and obedient to any and all troops who assist you in today's daily containment activity. Have a good morning and, as always, thank you for your cooperation.

Too Many Coincidences to Be Coincidence…Just Like 9/11

1) So, C 19 comes along, and now we need a vaccine, and there is going to be a meat shortage, too? And Gates just happens to come to the rescue in the business of Vaccines and Artificial Meat?
2) And prior to any of this, Gates funds a simulation (Event 201) about this very scenario (a global pandemic created by a new SARS-like CV) a month before it actually happens?
3) And Fauci funded $7.4 million in gain-of-function research to the Wuhan lab for the express purpose of generating a viral mutant capable of crossing over from bats to humans just so that they would be ready in case it happens someday? And he did it coincidentally after a moratorium was placed, and then suddenly lifted for this type of research? And he did it right when Phase II of this funded program kicks in 2019, right when this very virus they were attempting to genetically create in the Wuhan lab shows up in the population in Wuhan?
4) And Fauci is also a lead council member of the Gates Foundation's Global Vaccine Action Plan (GVAP)?

Man, if you weren't a conspiracy theorist before this, I bet you are one now.

(Everything above is fact checked and true, btw)

- Doug Corrigan

The Price of Indifference

Many Americans did not care about the millions dying in The Middle Eastern wars, nor the millions starving to death and being persecuted in Africa, etc… They declared, "Why should I care? I do not even know those people, "over there". They are inferior to me, uneducated, violent, and crass. Their survival is of no real concern to me. However, I deserve to live and enjoy the standard of life in America than my forefathers enjoyed, including having access to any culinary delicacies my heart desires, digital technology, and nonstop access to entertainment." Of course, America's forefathers did not enjoy such things. On the contrary, they were consumed with turmoil and fought for liberty and the right for freedoms that had, prior to their struggle, only existed in the lives of the regal and upper-class gentry.

And so, the ubiquitous apathy of Americans towards Third World countries grew with each passing year of American cell phone upgrades, digital downloads, and new and exciting blockbuster movies. I remember warning friends of mine that their apathy towards the Third World downtrodden would someday return in the form of "blow back". I had warned them that the Technocratic Elite were practicing Eugenics in The Middle East and Africa through their incessant wars, Vaccination programs, and food and resource distribution sanctions and restrictions. I reminded them that they were not immune to such oppression by turning their backs on their less fortunate brothers and sisters, and that they would someday reap the consequences of such apathy and insensitivity. I told them that the Eugenics programs that the Technocratic Elite were employing in the Third World countries would come home to roost in America very soon if it were not stopped in its tracks by conscientious Americans such as themselves. Nevertheless, the response was always the same, "I have enough to think about concerning my own survival and getting what I want out of life, and there is just no time to care about somebody thousands of miles away."

They would assert that life is the luck of the draw, and we cannot save everyone. In between their words, was the clear message that, "Somebody has to make my cell phone and it is not going to be me because I am too intelligent

to do such menial labor. And so, it might as well be a 12-year-old Philippine girl working 16 hours a day in a sweat shop until she goes blind at 18 and is then cast out into the street to die of starvation. I never even think of her, so why should I care?"

So you see, they always had a rationalization for their selfish absorption. If it was not their bills, it was their need to avoid anything that reminded them of the hardship that they felt they did not deserve by virtue of the fact that they were an American. Such hardship was the natural heritage and legacy of the little African boy starving to death in the mud. He deserved it because he was simply not fortunate enough to be born in Manhattan. The main driver of such racial prejudice and white supremacy in Africa was the inferior science of Eugenics which laid the foundation for institutionalized Apartheid, eventually.

And to be sure, the sheepish stupidity and indifference of certain Americans was most likely a consequence of their belief that by living in the same geographical location as the perpetrators of international aggression (The United States), they were immune to the ravages of economic and military aggression, themselves. It is like having a big Mafia Boss as your landlord, and as long as he keeps all the other Mafia Bosses away from your neighborhood, you feel secure. His crimes against humanity are your benefit, and so you do not complain or care about all those who suffer at the hands of this Mafioso protectorate.

Democide

Nevertheless, the sick and twisted irony of one's indifference to the suffering of foreign lands is that it merely adds strength to a tyrant, and a tyrant will not stop at the domination of foreign counties. A tyrant will dominate his own country with equal zeal and enthusiasm. Domestic attacks on local population are far easier to accomplish than overseas proxy wars, anyway.

Bill Gates: Democidal Maniac

The killing off of country's people its own ruling government is known as Democide, and it is the number one cause of death in the world, more lethal than all Pandemics, wars, cancer deaths, or car accidents combined. Democide

is a term proposed by R. J. Rummel since at least 1994 who defined it as "the intentional killing of an unarmed or disarmed person by government agents acting in their authoritative capacity and pursuant to government policy or high command". This is domestic murder and most governments who indulge in this are Communist blocks, as history testifies. This is why Bill Gates is attempting to get the United States to follow the Chinese model so incessantly. He wants Democide…mass Eugenics applied to America (And all the world) for the greater good of the Technocratic New World Order.

Democide C 19ers a wide range of atrocities perpetrated upon an indigenous country:

1) Forced labor and concentration camps
2) Killings by "unofficial" private groups
3) Extrajudicial summary killings
4) Mass deaths due to the governmental acts of criminal omission and neglects
5) Deliberate famines
6) Killings by an de facto government
7) Civil war killings
8) Bio warfare

And now, the consequences of American apathy has come full circle. The Technocratic Elite, emboldened through little or no opposition to their Eugenics Agenda, throughout The Middle East and Africa, spearheaded by Bill Gates, have unleashed their coup de grace, death blow to humanity in the form of a psychological propaganda strategy so vile and lethal that not only have nearly 235 million Third World citizens already starved to death since the infamous lockdown of the world in February, but billions, worldwide, have lost their jobs, careers, income, and are currently under house arrest, with the threat of lethal Vaccinations and Contact Tracer driven incarcerations staring them in the face. In America's apathy towards the starving multitudes in downtrodden counties, they have invited into their home the beast of their own demise.

Is it time to care, now?

Elon Musk Fancies Himself Deus Ex

So, Elon Musk is having what the internet might call a "normal one". The billionaire Tesla CEO is no stranger to social media explosions, but his twitter feed over the past two days has been exceptional even by those standards. Much of this is doesn't require too much explanation: he pivoted on Friday from talking about how businesses needed to open despite the risk of CV to more existential content, saying that he was going to sell all his possessions and that his girlfriend was mad at him. He also changed his profile picture, which might confuse someone not all that familiar with video game history.

The game from his profile picture is Deus Ex, released in 2000 by Eidos Interactive and Square Enix. It's a seminal cyberpunk game and one of the sterling examples of interactive sims and first-person RPGs, but its setting is probably a little more relevant here. In it, a conspiracy has released a man-made plague called the Gray Death as a kind of mass culling pandemic and are using their military might to restrict access to the vaccine.

It's relevant to our current situation in broad strokes, mostly, but also in the more specific notion of a deadly disease that disproportionately effects the already poor.

It's unclear what, exactly, Musk wishes to communicate by bringing Deus Ex into an already perplexing Twitter rant, but most on social media have pointed out that he bears a certain resemblance to the power-hungry billionaire that becomes the game's main antagonist. Musk recently attempted to force his employees to show up to work despite the statewide stay-at-home order and has vocally downplayed the seriousness of C 19 for months.

In the game, Page's ultimate plan is to merge with an AI to become a kind of all-powerful God, which does seem like it would be up Musk's alley. Again, his choice to switch his profile picture to plague-oriented fiction doesn't seem like a coincidence given the current circumstances, but it's unclear what, beyond that, he's trying to say.

-- https://www.forbes.com/sites/davidthier/2020/05/02/heres-whats-happening-with-elon-musks-twitter-picture/#24bff6ad50da

Gray Death and Deus Ex

The Gray Death is a nano-virus used by Majestic 12 in Deus Ex as part of their plan to take over the world.

The Gray Death occurs when an individual without a predisposition for nano augmentation is infected with nanites. The nanites integrate themselves into the individual's cells and the individual's body rejects the nanites, and by extension the cells that the nanites have integrated with. The virus can be halted by the use of Ambrosia, a vaccine that consists of ROM modules which attach to the nanites. The virus and vaccine both must be manufactured in a Universal Constructor.

The nanites were originally created by Morgan Everett. The idea to use them as a weapon was first put forth by Bob Page; when the proposal was frowned upon by the other Illuminati, he organized a successful coup d'etat against the Illuminati using its splinter faction, Majestic 12.

"NEW YORK -- No student of recent history can fail to miss the irony that the greatest enemy mankind has faced in the 21st century was not any despot or dictator, but the lowly microbe. Millions upon millions have been killed by the pandemics of AIDs, resistant tuberculosis, and the Century Flu, and now we face our greatest threat yet: the "Gray Death," a plague of devastating efficiency that has surfaced in the last year.

But was this plague an accident of nature, or a design of science? Dr. Kenji Ishii of the New World Biomedical Health Center in New York thinks not. "My analysis of this plague indicates that it is decidedly unnatural in origin, and in point of fact, may be extraterrestrial." He went on to speculate about those afflicted. "Obviously, a disproportionate number of the indigent seem to be infected, a situation that makes perfect sense if you consider it prelude to an

invasion. No more effective way to disrupt the social, political, and military fabric of Earth has yet been devised."

If this is so, then what are our leaders not telling us? And how can we be prepared? Only they know they answers."

Victims of the Gray Death

Once exposed to the virus, it is demonstrated that beginning signs of infection result in flu like symptoms, usually coughing. As the infection progresses to later stages, the individual turns pale white/gray, hence "Gray Death", and becomes increasingly frail, where speech can also be affected. Eventually, the individual would also experience severe pain throughout the body, due to the virus eating away cells, which would inevitably cause the victim to succumb to death.

"The Gray Death epidemic is spreading rapidly into rural communities, according to a bulletin from the Center for Disease Control in Atlanta. Until now, the plague has been localized in major urban areas, and there was some hope that a large population concentration was required in order for the disease to spread.

The report states that rural infections now stand at 8.7 percent of area population, up from 2.4 percent six months ago. In urban centers, the infection rate has risen from 22.4% to 28.6% in the last six months. In all regions, the plague carries a fatality rate of 93% within the first 100 days of infection.

The CDC bulletin stated that no breakthroughs have occurred in the search for the plague’s origin, vectors or cure, but that government research programs continue."

Both the Gray Death and its vaccine, Ambrosia, are produced by VersaLife, a subsidiary of Page Industries. By creating large amounts of Gray Death and small amounts of Ambrosia, MJ12 were able to force powerful individuals to carry out their bidding. For example, Bob Page placed an unnamed senator on the priority list for the vaccine in exchange for promoting

Walton Simons to position of director of FEMA. MJ12 also used the virus to create a state of emergency and to generally destabilize the world.

There is also indication that the release of the virus was intended to speed up the nano augmentation project. MJ12 had Ford Schick, a scientist they captured in New York, working to integrate the Gray Death into test subjects. If Schick, or any other scientist, were to find a way to eliminate the negative health effects of the Gray Death they would disC 19er how to successfully nano augment anyone in the process.

Bob Page states that it would be extremely easy for him to create a new virus if a cure to the Gray Death was to be found. Apparently, all he would need to do is "find a very large prime number and multiply", suggesting the nanite somehow uses random number generation or encryption.

--https://deusex.fandom.com/wiki/Gray_Death

Who is Elon Musk, Actually?

In actuality, Elon Musk is a controlled opposition agent who only appears to be for the “Revolution” in order to gain their trust to get them Vaccinated and Neural Links to A.I. Musk is a controlled puppet for the Technocratic Elite.

Elon Musk Pretends to Want Less

I am kind of confused as what’s Elon Musk’s agenda? I could be totally wrong... but I want to see what do you all think!

I am all for reopening California... but somehow I have hard time trusting Elon Musk!

Elon musk has ruined the night sky with his star link project! While everything was in lockdown, Elon Musk’s Star link project was still active!

He launched 422 satellites beaming their waves on us. Many more in pipeline!

He did that despite the astronomical society pleaded with him to stop the Starlink project because that would completely obscure the skies and would make it impossible to look into space anymore.

He still ignored that and launched his satellites, while the whole world is in lock down.

Elon wants to merge each one of us with AI so that we can be 10x more productive... that's a form of Slavery! He is trying to play God by deciding where and how humanity evolves. Watch his latest interview with Joe Rogan (from last week)... he almost sounds creepy!

I could be completely wrong... but one of the agenda of the Elites is to create hatred for the political parties... so we the people eventually accept a new kind of world order (New World Order) that's shown to us as an alternate... without any resistance from our end!

It's like these Elites do things to basically make us feel that they are on our side, and that we don't need any such government to run our lives! Basically bringing in the "New World Order", ruled by technocrats and Elites!

Also the whole self-driving car, and electric car... with cars being monitored all the time is taking us all to the surveillance era... which the Elites always wanted!

Elon Musk recently said, "He is selling all his physical possessions"!

Suddenly all this rich and famous have been telling the world to stop consumerism, and enter a society of sustainable development, where Elites will control what you say, what you think, what you eat, how much energy you can consume! All this in the name of Global Warming! Besides this they are planning to take away your land, home, cars, and planning to put us all in cramped houses!

And this is what Global Elites and UN is pushing for from decades! This Pandemic is their golden opportunity to get the ball rolling!

I never thought in all these fronts before... but nowadays I have started to question myself... that everything that glitters is not always gold! There is always an alter agenda behind these things... that we as an average human being cannot comprehend, as to what goes in the minds of these technocrats!

Starlink is a project that aims to bring more than 12,000 satellites into orbit to provide cheap WiFi for the whole world. But again this will be like a Monopoly!

Billionaire Elon Musk has asked permission to launch 30,000 similar satellites into space.

The first 60 Starlink satellites were put into orbit in May 2019 and received much criticism that the bright streaks of these satellites in the night sky affected astronomical observations. It is expected that these satellites will be spaced out in different directions at different heights from 547 to 1,142 km.

Starlink satellites have previously raised concerns about space junk, and even the European Space Agency (ESA) now worries that these satellites will hinder their work. Late last year, the agency said that "for the first time in history, ESA had to" collision avoidance drills "to protect one of its satellites from colliding with a" giant constellation "when join traffic on space ”.

People also worry that humans might be trapped on Earth by too much cosmic garbage in Earth’s orbit. A space scientist believes that Mr. Elon Musk’s plan could create an impenetrable wall of cosmic trash that envelops our planet. The cosmic debris disaster left behind by satellites could hinder rocket launch from Earth, a consequence known as the "Kessler syndrome"

--Sony Pandey

Civil War Between Conflicting Factions

One obvious goal of the Scientific Technocracy is simply to create enough philosophical division between Americans that it will result in Civil War. It will be a war between the stupid paranoid Pandemic believers, and the more intelligent, science based Pandemic Hoax Exposers. It is merely another iteration of the Hegelian Dialectic by the Jesuits who are perpetrating this Pandemic Hoax.

Nazi Contact Tracer Gestapo Program

CoronApocalypse Contact Tracers and Their NAZI Implications

This is exactly the same tracking strategy used by IBM computers to identify Jews for incarceration if Nazi Germany. The Jews were compliant because they were uninformed.

They want us snitching on each other and suspect of each other. This is the most pernicious form of social control ever devised, to distrust basic human contact and interaction because there are germs and viruses in the world.

That is the next big government program to push for total surveillance over our lives. Now the real fallout from the CoronApocalypse comes to light.

First of all, the term, "Contact Tracer" is misleading. These are snitches, who can easily get you and your family sent to a place where you will most

likely suffer or die. Let us be clear about this. Once you are identified as a "health threat", there is no saying what might happen to you in this new NAZI regime.

The Elite always use propaganda terminology to smooth over what they are doing to you. House Arrest and Martial Law was called "sheltering in place", remember?

Instead of "Contact Tracer", here are a few more precise words which more aptly describe those people who willingly track down, interrogate, and implicate their fellow human being as a "health threat" to society:

1) Informer

2) Betrayer

3) Canary

4) Fink

5) Informant

6) Informer

7) Nark

8) Rat

9) Snitcher

10) Squealer

11) Stoolie

12) Talebearer

13) Tattler

14) Tattletale

15) Telltale

16) Blabbermouth

17) Deep throat

18) Double-crosser

19) Grass mole

20) Sneak

21) Snout

22) Stool pigeon

23) Tipster

24) Turncoat

25) Weasel

26) Traitor

27) Judas

28) Spy

29) Snake

30) Quisling

31) Accuser

32) Snake in the grass

33) Backstabber

34) Deceiver

35) Fizgig

36) Defector

37) Leaker

38) Deserter insider

39) Blab

40) Double agent

41) Rumormonger

42) Collaborator

43) Crier

44) Notifier

45) Apostate

46) Double-dealer

47) Recreant

48) Serpent

49) Scab

The very people who created a fake pandemic out of faulty statistics, media fear-pimping and the rankest of propaganda are now pushing the total surveillance state to falsely protect us from the next crisis.

CV Detectives: Here's How Counties Try to Track Everyone Exposed

By the time public health officer Bela Matyas learned that the novel CV was spreading in Solano County, the patient in her 40s was already on a ventilator.

Back in February, the woman was the first in the nation known to be infected without traveling or being around someone who was sick. But she was too ill to answer questions about where she'd been and whom she had talked to, worked with and touched.

Dozens of public health investigators from local, state, and federal agencies fanned out like detectives, questioning the family members who had visited her and the hospitals that had orchestrated her care — even staking out

the store where she worked. Their mission: to piece together a list of people who could have been exposed to the virus.

In the end, the list totaled more than 300 people spanning six California counties, Matyas estimated. Four — including three healthcare workers — tested positive, each prompting their own investigation.

This process, called contact tracing, is a critical element in containing the spread of the novel CV. But the ability of California's 61 county and city public health departments varies greatly as they struggle to keep pace with rising numbers of patients.

"What we had to do was clear from the beginning," Matyas said. "But actually being able to do it was very hard."

Some local health departments, like Madera County's, have managed to trace the contacts of every person who tests positive for the CV. Others, like the city of Long Beach and Placer County, are so overburdened that they are only trying to trace contacts that could put vulnerable people at risk, such as healthcare workers or people in nursing homes.

To handle the pandemic, the nation will need 30 contact tracers for every 100,000 Americans, according to the National Association of County and City Health Officials. But no California city or county has anywhere near that many. Under that formula, for example, Long Beach would need 140 investigators, seven to nine times more than it has now.

North of Sacramento, Placer County, with a population of almost 400,000, would need 120 tracers.

"It certainly illustrates the point that 18 — which is our expanded capacity, which is more than our baseline of six — is woefully inadequate," said Aimee Sisson, Placer County's public health director.

Contact tracing will become even more important as the state starts reopening parts of its economy. The concern is that more human interaction could cause flare-ups, especially since people can spread the virus before feeling ill and limited testing leaves people unaware, they're infectious.

"We need to make sure that there is capacity in every county to do adequate contact tracing. That's part of containing the disease," said Kat DeBurgh, executive director of the Health Officers Association of California. "Are we ready today? No. When will we be ready? I don't know."

Gov. Gavin Newsom addressed the concern about inadequate contact tracing on Wednesday, announcing plans to train 10,000 people to help local health departments. "The good news is we believe we have the capacity to build an army of tracers," Newsom said, although he did not say when they'd be ready to deploy.

Jeffrey Martin, a professor of epidemiology and biostatistics at the University of California, San Francisco, said that fighting an epidemic is like fighting a wildfire: The state can't afford to mess up containment.

"[It's] important to track all of those people down to extinguish all the embers in that brushfire," Martin said. "If we don't do it right, and if the brush fires are not extinguished, you'd have to be a magical, wishful thinker, to think that there would not be a raging wildfire."

The San Joaquin Valley county of Madera typically has two to three people keeping tabs on tuberculosis and sexually transmitted infections in its population of roughly 157,000 people.

Then, the CV hit — and the initial cluster encompassed about 200 patients and potential contacts, said Madera County public health director Sara Bosse. Thirty-six people have tested positive.

Still, by teaming with the sheriff's department and probation investigators, the county has managed to keep up contact tracing, isolation, and quarantine for everyone potentially exposed.

Madera is unusual in that investigators, typically in plain clothes, visit patients and their contacts in person — sort of. They drop off packets of information as well as a letter excusing work absences to employers. Then they get back into their cars, and answer questions face-to-face through the window, over the phone.

"Then they can explain to them what's going on," Bosse said. "We understand that people are experiencing a lot of anxiety and it's difficult for people to hear this news that they might have been exposed."

For now, the spread of the virus seems to be slowing. "We're really hopeful that it's at least in part due to the active contact tracing that we've implemented," Bosse said.

The spread of the novel CV in Madera County appears to be slowing, according to county data.

In Riverside County, cases are coming in faster than the county's 30-plus person team can investigate them, according to Barbara Cole, branch chief of disease control for the county's public health department. The county has 3,084 confirmed cases.

It can take multiple phone calls to build enough trust to reconstruct someone's string of contacts, Cole said.

"It's about trying to establish a rapport, stressing how we're going to protect their confidentiality," she said. "The majority of people, they're concerned about their friends and their family."

In the Northern California county of Solano, Matyas quickly realized that tracing and quarantining all contacts would be impossible for every case. To date, 186 people have tested positive in the county.

Instead, the county focuses on tracking the risk to vulnerable populations, including people who are older, have underlying medical conditions, or live without shelter.

Solano County's communicable disease team, which has shrunk to its original staff of six, first interviews anyone who tests positive about where they work and who they came in contact with. That in some cases is a long list: people who visit their homes, coworkers who sit close or share food.

Then a member of the team calls all of the contacts. The idea is to identify and isolate people who are feeling ill or whose jobs put them at risk of infecting others in nursing homes, hospitals, or homeless shelters.

"We no longer pretend that we can do any kind of active quarantine," Matyas said. "There's no bandwidth to check on them to see if they're doing it."

Workers are conducting patient interviews and case follow up at the Long Beach health department's operations center. Photo by epidemiologist Nora Barin.

Long Beach and Sacramento and Placer counties also are only tracing the virus's spread through vulnerable populations

"Instead of asking every place you went to, every person you came into contact with, we say, 'Have you been in contact with vulnerable populations?'" said Sisson in Placer County. "We just have too many cases for that full interview." In the county, which is home to the first person to die of the novel CV in California, 133 people have tested positive.

In Long Beach, every case initially was tracked. But then people kept getting sick, and most of the deaths are in long-term care facilities.

As people sheltered in place, contact tracing didn't have to be as extensive. "Now we're to the point where we have more than 400 cases, and we're really focusing on our healthcare worker cases, and our cases in our long-term care facilities," said Emily Holman, communicable disease controller for the city's health department.

Tracing contacts of people in long-term care facilities is different than in the community at large. Instead of focusing on reconstructing a web of contacts, the aim is to rapidly identify and separate infected and potentially exposed people from healthy people. Speed is key, so if someone's symptomatic, they're treated as a case even with no test results.

"Every minute in those facilities can be crucial and could prevent an exposure," Holman said.

Staffing up

Former CDC Director Tom Frieden called for an army of more than 300,000 contact tracers in an interview with STAT. And current CDC head Robert Redfield announced plans to hire 650 more public health personnel, including to help with contact tracing, the Washington Post reported.

Local health departments have been bolstering their workforces on their own. San Francisco plans to recruit and train as many as 150 people to conduct contact tracing, including librarians, city attorney staff and medical students.

The Bay Area's Alameda County also has ramped up from just seven staff investigating cases of communicable disease to 60 people assigned to the novel CV — including 18 who follow up with contacts. As the epidemic progresses, "we anticipate deploying as many as 300 staff for contact tracing," said Nicholas Moss, acting director of Alameda County's Public Health Department.

Sacramento County is working to expand its six-person team to 30 by recruiting from other departments and training medical students to work with people who are homeless.

"We're hoping that based on the modeling that's occurring, that we will be ready — and actually, we're hoping that there won't be another wave," said Public Health Officer Olivia Kasirye.

Is there an app for that?

Some counties are looking to technological help. San Francisco, for instance, is training its contact tracers to use a platform that Grant Colfax, director of public health, called "an integral part of our efforts going forward."

The platform, developed by a software company called Dimagi, is not an app that people can download to their phones. Instead, it's a web portal that public health workers can use to keep tabs on people with infections, list their contacts and keep in touch.

Apple and Google also have proposed tracking people's proximities using Bluetooth. Newsom has said the state is vetting various technologies.

But Alameda County's Moss is cautious about protecting the privacy of residents.

"We want to make sure that any technological tool we employ where people's health information is going to be input, that there are adequate safeguards for privacy," Moss said. Plus, the app has to be easy to use, and it has to cough back up the data needed to keep tabs on the virus's spread.

Eric Sergienko, Mariposa County's health officer, worries that if each local health department ends up using different software, it might be hard to trace contacts that cross county lines.

That's where Sergienko hopes the state steps in and standardizes the platform California's counties use. "What can the state do for us? Just by finding the best one," he said.

State Health and Human Services Secretary Mark Ghaly said that California will need 10,000 more contact tracers as it modifies its stay at home order. Between 2,000 and 3,000 people could test positive per day. And each of them could have ten contacts, he said.

California might not have needed to push quite so hard to ramp up during the crisis if it had funded enough public health workers to begin with. "We've been seeking increased funding for years," said Kat DeBurgh, executive director of the Health Officers Association of California.

More trained health workers could be important in fending off the next pandemic.

"By having these trained contact tracing public health workers, we can actually prevent infections, prevent the severe disease from happening in the first place," said Lee Riley, a professor of epidemiology and infectious diseases at the University of California, Berkeley's School of Public Health.

"But right now, everything that we've been doing is just reactive to what's already happened."

--https://calmatters.org/health/2020/04/california-CV-contact-tracing/

California Readies Army of CV Detectives

California gears up to train thousands of state workers to trace the spread of the virus amid plans to re-open the state.

The Newsom administration has teamed with two universities to train more than 3,000 employees per week to become CV detectives tracing the spread of the disease throughout California.

Starting Wednesday, the University of California, Los Angeles and the University of California, San Francisco will provide 20 hours of online and in-person training to state employees selected for the program.

The new "training academy," as Gov. Gavin Newsom called it, is part of an effort to build an army of 20,000 people to test, trace and isolate people who may have been infected.

In addition, a new statewide database will help local health departments trace infected people and their contacts as they travel through the state.

"I'm very excited about that innovation," said Madera County public health director Sara Bosse. "It is something that we have needed for a decade in California, because we often have cases in which contacts cross counties for any disease."

The process of tracking the virus as it spreads from person to person is called contact tracing. And experts agree that it is critical to quashing new outbreaks of the novel CV before they start — particularly as efforts to reopen the state provide more opportunities for infection.

“As people move more, we increase the risk for people to get sick,” Sonia Angell, California Department of Public Health director and State Health Officer, said in a live stream. “If people get sick, we want to identify those individuals very early, and then make sure that all of their contacts are also identified.”

Right now, 23 of California’s 61 local health departments are actively tracking exposed contacts as the CV spreads from person to person, according to Newsom.

Nearly 3,000 investigators interview people who test positive, identify the people they’ve interacted with and notify them that they need to isolate or quarantine.

But the National Association of County and City Health Officials estimate that the nation will need 30 contact tracers for every 100,000 Americans to handle the pandemic. Which means that California’s 2,845 contact tracers fall far short of the 12,000 needed to track the virus through California’s population of nearly 40 million.

To that end, Newsom announced plans to redeploy state employees with “the right kind of background cultural sensitivity, cultural competency, different language skills, a health mindset.”

Madera County’s Bosse said she hasn’t yet seen the training modules. But she said that training resources have been a real need across the state, although her county has adjusted.

“Our contact-tracing resources, as you know, on a regular day, are quite small,” Bosse said — which means few people are generally available to help with training. “At this point, we now have a collection of folks that have significant skills and could easily do shadowing and on-the-job training.”

The new online training program could help standardize contact-tracing state-wide, she said. “It’s comforting to know that people would at least have a similar approach.”

Newsom and Angell did not say how they would provide in-person instruction, given public health recommendations for physical distancing.

They also did not say when the new contact tracers would be deployed. But when they are, local health authorities can request staffing help from the state, according to Angell.

The new contact-tracing platform the state announced today will sync up with California's existing digital disease surveillance platform and contact tracers can use it to check in on people's symptoms through texts, chat, emails, and phone automation, according to Angell. Angell emphasized that the database will focus on health information and will be kept confidential.

Bosse hopes the new digital database will help streamline contact-tracing for cases and contacts that cross county borders.

Still, there's one major caveat to the state's efforts to bolster contact-tracing, she said: people must be willing to cooperate, particularly if cooperating means missing work and wages — and potentially putting friends, family, and coworkers out of work for two weeks, too.

The Bait:

"With so many people who are unemployed or underemployed at this point, once they have the ability to be employed, are they going to be willing to be tested?" Bosse asks.

"Wage replacement, so ability to be paid sick leave, is going to be super important — or people are not going to agree to be tested, and then our contact tracing efforts will be really limited."

--https://calmatters.org/health/2020/05/california-CV-contact-tracing-training/

No Trespassing! Message to Contact Tracers

You can legally tell a Contact Tracer to leave your property. They cannot come in without a warrant.

California trespassing laws protect the sanctity of private property.

It is a crime to enter or remain on private property without permission and violators can be charged with trespassing under **California Penal Code Section 602 PC.**

If a gun is necessary, so be it.

What is the PCR Test for C 19 Infection?

Samples are taken from places likely to have the virus that causes C 19, like the back of the nose or mouth or deep inside the lungs. After a sample is collected, RNA, which is part of the virus particle, is extracted and converted to complementary DNA for testing. The PCR test involves binding sequences on the DNA that only are found in the virus and repeatedly copying everything in between. This process is repeated many times, with doubling of the target region with each cycle. A fluorescent signal is created when amplification occurs, and once the signal reaches a threshold, the test result is considered positive. If no viral sequence is present, amplification will not occur, resulting in a negative result.

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https://jamanetwork.com/journals/jama/fullarticle/2764238

Lastly, one crucial thing to remember is that the CV test will most likely contain CV. The PCR test can only test for CVes and not C 19, specifically. PCR (polymerase chain reaction) is a method to analyze a short sequence of DNA (or RNA) even in samples containing only minute quantities of DNA or RNA. PCR is used to reproduce (amplify) selected sections of DNA or RNA. Previously, amplification of DNA involved cloning the segments of interest into vectors for expression in bacteria and took weeks. But now, with PCR done in test tubes, it takes only a few hours. PCR is highly efficient in that untold numbers of copies can be made of the DNA. Moreover, PCR uses the same molecules that nature uses for copying.

Hence, it will be a false positive from the test, which will read as CV, a virus which is as common as the common cold and flu. Subsequently, anyone taking the C 19 test can be implicated as infected, from this twisting of logic.

DEMOCRATS INTRODUCE HOUSE BILL H.R.6666 TO AWARD GRANTS TO ELIGIBLE ENTITIES TO CONDUCT C 19 TESTING AND CONTACT TRACING SURVEILLANCE

H.R.6666 - To authorize the Secretary of Health and Human Services to award grants to eligible entities to conduct diagnostic testing for C 19, and related activities such as contact tracing, through mobile health units and, as necessary, at individuals' residences, and for other purposes.

H.R.6666 - C 19 Testing, Reaching, And Contacting Everyone (TRACE) Act

116th CONGRESS

2d Session

H. R. 6666

To authorize the Secretary of Health and Human Services to award grants to eligible entities to conduct diagnostic testing for C 19ID–19, and related activities such as contact tracing, through mobile health units and, as necessary, at individuals’ residences, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

May 1, 2020

Mr. Rush (for himself, Ms. Barragán, Ms. Bass, Mr. Beyer, Mr. Brown of Maryland, Mr. Butterfield, Mr. Cárdenas, Mr. Carson of Indiana, Mr. Cohen, Mr. Correa, Mr. Cuellar, Ms. DeGette, Mrs. Demings, Mr. Gonzalez of Texas, Mr. Grijalva, Mr. Hastings, Mrs. Hayes, Mr. Higgins of New York, Ms. Kaptur, Mr. Khanna, Ms. Kuster of New Hampshire, Mr. Larson of Connecticut, Mr. Lynch, Ms. McCollum, Ms. Moore, Ms. Norton, Mr. Payne, Mr. Raskin, Mr. Rouda, Mr. Ryan, Mr. Sarbanes, Ms. Sewell of Alabama, Mr. Sires, Mr. Soto, Ms. Tlaib, Mr. Thompson of Mississippi, Mr. Van Drew, Ms. Velázquez, Ms. Wasserman Schultz, and Mrs. Napolitano) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To authorize the Secretary of Health and Human Services to award grants to eligible entities to conduct diagnostic testing for C 19ID–19, and related activities such as contact tracing, through mobile health units and, as necessary, at individuals' residences, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "C 19ID–19 Testing, Reaching, And Contacting Everyone (TRACE) Act".

SEC. 2. C 19ID–19 TESTING AND CONTACT TRACING USING MOBILE HEALTHUNITS.

(a) In General.—The Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention, may award grants to eligible entities to conduct diagnostic testing for C 19ID–19, to trace and monitor the contacts of infected individuals, and to support the quarantine of such contacts, through—

(1) mobile health units; and

(2) as necessary, testing individuals and providing individuals with services related to testing and quarantine at their residences.

(b) Permissible Uses of Funds.—A grant recipient under this section may use the grant funds, in support of the activities described in subsection (a)—

(1) to hire, train, compensate, and pay the expenses of individuals; and

(2) to purchase personal protective equipment and other supplies.

(c) Priority.—In selecting grant recipients under this section, the Secretary shall give priority to—

(1) applicants proposing to conduct activities funded under this section in hot spots and medically underserved communities; and

(2) applicants that agree, in hiring individuals to carry out activities funded under this section, to hire residents of the area or community where the activities will primarily occur, with higher priority among applicants described in this paragraph given based on the percentage of individuals to be hired from such area or community.

(d) Distribution.—In selecting grant recipients under this section, the Secretary shall ensure that grants are distributed across urban and rural areas.

(e) Federal Privacy Requirements.—Nothing in this section shall be construed to supersede any Federal privacy or confidentiality requirement, including the regulations promulgated under section 264(c) of the Health Insurance Portability and Accountability Act of 1996 (Public Law 104–191; 110 Stat. 2033) and section 543 of the Public Health Service Act (42 U.S.C. 290dd–2).

(f) Definitions.—In this section:

(1) The term "eligible entity" means—

(A) a Federally qualified health center (as defined in section 1861(aa) of the Social Security Act (42 U.S.C. 1395x(aa))).

(B) a school-based health clinic.

(C) a disproportionate share hospital (as defined under the applicable State plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) pursuant to section 1923(a)(1)(A) of such Act (42 U.S.C. 1396r–4)).

(D) an academic medical center.

(E) a nonprofit organization (including any such faith-based organization);

(F) an institution of higher education (as defined in section 101 of the Higher Education Act of 1965 (20 U.S.C. 1001)).

(G) a high school (as defined in section 8101 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7801)); or

(H) any other type of entity that is determined by the Secretary to be an eligible entity for purposes of this section.

(2) The term "emergency period" has the meaning given to that term in section 1135(g)(1)(B) of the Social Security Act (42 U.S.C. 1320b–5(g)(1)(B)).

(3) The term "hot spot" means a geographic area where the rate of infection with the virus that causes C 19ID–19 exceeds the national average.

(4) The term "medically underserved community" has the meaning given to that term in section 799B of the Public Health Service Act (42 U.S.C. 295p).

(5) The term "Secretary" means the Secretary of Health and Human Services.

-- https://www.congress.gov/bill/116th-congress/house-bill/6666/text?r=2&s=1

Bill H.R. 6666 to Award Grants to Eligible Entities to Conduct C 19 Testing and Contact Tracing Surveillance

The deeper we go into this dystopian world of C 19, the murkier things get. But ironically, from a biblical perspective, they are stunningly clear, at least to me anyway. That C 19 is being used to bring in the New World Order is now a proven point, only the most pathological of gainsayers can dispute it at this point. And connecting C 19 to the Mark of the Beast system? Why it's an easier slam-dunk than anything ever attempted by Michael Jordan or Lebron James. So is anyone really surprised at H.R. 6666 to allocate funding for contact tracing digital surveillance and home inspections by government agents? Nope.

"Here is wisdom. Let him that hath understanding count the number of the beast: for it is the number of a man; and his number is Six hundred threescore and six." Revelation 13:18 (KJB)

So here we are, on the front lines of the End Times, and what should we be doing? We should be telling lost people about salvation in Jesus Christ and encouraging the saints to get something done for the Lord whilst time remains.

From Congress.gov: H.R.6666: 116th Congress (2020):

"To authorize the Secretary of Health and Human Services to award grants to eligible entities to conduct diagnostic testing for C 19, and related activities such as contact tracing, through mobile health units and, as necessary, at individuals' residences, and for other purposes."

Bills are generally sent to the Library of Congress from GPO, the Government Publishing Office, a day or two after they are introduced on the floor of the House or Senate. Delays can occur when there are a large number of bills to prepare or when a very large bill has to be printed.

Contact tracing, combined with expanded testing, is a pillar of the state's modified stay-at-home order and The goal is to track and trace every person in the state who may have been exposed, then quickly isolate and test them So in

other words the state cannot open up without contact tracing and only then it would be a modified stay-at-home order, and not actually removing the lockdown in its entirety .

https://www.nowtheendbegins.com/democrats-congress-hr-6666-to-award-grants-to-eligible-entities-C 19-testing-contact-tracing-citizen-surveillance/

Democrats Introduce House Bill H.R. 6666 to Award Grants to Eligible Entities to Conduct C 19 Testing and Contact Tracing Surveillance

H.R.6666 - To authorize the Secretary of Health and Human Services to award grants to eligible entities to conduct diagnostic testing for C 19, and related activities such as contact tracing, through mobile health units and, as necessary, at individuals' residences, and for other purposes.

Police State Dry Run a Huge Success

When the CV landed on our shores, communist China came with it.

We have become part of a mass scale human experiment in government control and it turned out that stripping away our freedom wasn't all that difficult. Under the guise of concern for our health and well-being, tyrants came out of the woodwork. Our Constitution, our Bill of Rights, and our lives are being destroyed as the left solidifies and expands their oppressive powers. We've been herded around like cattle, threatened, isolated, confined, silenced, and arrested. You name it, it's happening.

You tell me if what follows sounds like the United States, or China.

We've been told who can work and who can't, with language that separates us according to who is and who isn't "essential" as the almighty State supersedes individual rights and the family unit.

We've been physically and verbally harassed, threatened, fined, detained, arrested, jailed, and/or placed in forced quarantine. Business licenses have been revoked. Going to work without the permission of the government is now a crime. So is going to the park or a beach. Children playing together is also in defiance of the government. So is placing flags on the graves of veterans. The list of infractions goes on and on and on and on. Examples read like the manifesto of a demented madman. (here, here)

Stay home. Do not go out. Do not earn money. Do not pay your bills, feed your family, maintain your credit rating, live your life. Do not make a single move without permission from the State or you will be punished.

Do not dare go to church. They have been shut down, some threatened with permanent closure. Even services that maintained social distancing were not tolerated. (here, here, here, here, here)

Religion cannot thrive in a totalitarian state, as the state must reign supreme.

Meanwhile, as churches are closed, jails are opened -- criminals are released en masse, including child predators, rapists, and murderers. Prisoners, wise to the ruse, are now intentionally infecting themselves so they can be released early. And the left can't get enough of it.

In several places, our right to protest has been stripped away as has our right to promote protests. Tech tyrants are involved, shutting down social media for those trying to spread the word about peaceful gatherings. The Bill of Rights has been set on fire and tossed off the top of a skyscraper as a police state rushes in. (here, here, here, here, here, here)

We've been subjected to inhumane separations, as the oldest among us are left to suffer alone in nursing homes, senior care facilities, and hospitals where there is often an impenetrable wall of secrecy surrounding patients.

Meanwhile, "contact tracing" has become the next frontier to advance the police state as fascist tech gets in on the act, tracking our every move. The government will hunt you down, find you, and force you and other members of your household to stay in your home, even if there's no food in the house. The quarantine cycle could leave an entire household locked up for weeks and weeks on end, with no end in sight as we are essentially placed under house arrest. Strategies for how to identify people who've met certain criteria have been discussed, including government issued armbands. (here, here, here, here, here, here, here, here, here)

To help the government keep us in line, we've been encouraged to snitch on our neighbors and hotlines have been set up for us to do just that. (here, here, here, here, here)

And in keeping with the good for me, but not for the reality of all oppressive regimes, many prominent leftists have broken their own rules so they could meet their lover, go golfing, take a walk with their family, get a haircut, and so on, all the while pointing their fingers and admonishing us little people to stay inside and do as we're told. (here, here, here, here, here, here, here, here)

For the most part, law enforcement has been willing to follow these tyrannical orders, often with multiple officers arriving on the scene.

As for the American Civil Liberties Union, not only are they missing in action, they're part of the cabal of tyrants with upside down values, evidenced by the message featured on their home page which states their priorities as follows:

"…protect voting rights, demand that vulnerable people in prisons, jails and immigration detention centers be released, and fight to ensure reproductive health care remains open and accessible to all who need it…"

In other words, voter fraud, prisoner release, illegal invader released, and abortion. (here)

All of this unfolds against the backdrop of an aggressive media campaign to parrot China's talking points, replete with lavish praise for the communist regime that waged war against the entire world. There's been a cascade of fools eager to align themselves with WHO and China, including many prominent individuals. The rush to embrace our enemies has resulted in silencing speech, as words such as "Wuhan flu" are deemed "hate speech." Punishment to be determined. (here, here, here, here, here, here, here, here)

And while the lust for power underpins this shocking spectacle, it's wrapped up in the guise of "safety." Who could possibly question a doctor in a white coat touting such an idea? No good totalitarian regime would be without its idealized worldview to sell fools down the river.

And so we've sailed, as our economy has collapsed, Americans have been controlled, law enforcement has complied, and people are bombarded with fearful messages every hour of every day – messages riddled with distorted information and lies, from bogus models to inflated mortality rates and everything in between, all of which serve to strengthen the left's case against Trump while corrupt hospital administrators rake in money from cooking the books on cause of death. But perhaps more than that, it's easier to control people who feel desperate and afraid. (here, here, here, here, here, here, here, here, here, here)

An exhausted and increasingly impoverished populace does not a healthy nation make. In fact, if you think this is bad, what could await is even more terrifying. As Dennis Praeger wrote in March:

…Economic disasters rarely remain only economic disasters. To give a particularly dramatic example, the Nazis came to power because of economics more than any other single reason…Nazi success at the polls was almost entirely related to the Weimar economy. Communist parties don't fare well in robust economies, but they're very tempting when people are in dire economic straits. Only God knows what economic dislocation the shutting down of

American and other Western economies will lead to. I am not predicting a Nazi or communist ascendancy, but economic and political disaster may be as likely, or even more likely, than a health disaster.

It is quite apparent by now that even if the most horrific scenario as described above does not unfold, we have already sealed our fate with respect to a disaster of monumental proportions that runs the gamut from increased drug and alcohol addiction, increased domestic violence, suicide, and avoidance of medical care, among other concerns. Tragically, the things that put human beings at risk for many of these dire outcomes are the very things that are being thrust upon us: unemployment and isolation. At the same time, one of the most powerful forces that serves as a protective factor offering comfort and hope has been denied us, as Americans have been barred from attending church. (here, here, here, here, here, here, here, here, here, here, here, here, here, here, here, here, here)

As for the oft-cited idea that we are at war with an invisible enemy, I would say, no, we are not. When nations go to war, they do so to defend their culture and way of life. Instead, we are destroying ours.

But there is a war being waged. The left is determined to take this nation down and the perfect time arrived to go in for the kill. Maximum suffering, pain, and destruction is on the menu and they're serving it up every day as they plunge small towns, cities, counties, and states into protracted lockdowns and shifting goalposts.

The scale of human suffering and the long-term effects of this are incalculable. They will not be seasonal, like a virus. They will be long-lasting. And the left cares not a bit.

There is one thing and one thing only they desire: power. And they're having at it. So far, the police state has been a wild success.

--Carol Brown

Globalist Scientists Slip in The Climate Change Issue into The Pandemic Hoax

The following is an article from the World Economic Forum. They are a Technocratic Think Tank organization pushing United Nations Eugenics.

The World Economic Forum C 19ID Action Platform

- Pandemics like C 19 could occur more frequently unless we stop rapidly destroying nature, a group of biodiversity experts has warned.
- 1.7 million unidentified viruses, known to infect humans, are estimated to exist in mammals and water birds.
- Rampant deforestation, agricultural expansion and infrastructure development bring us closer to catching them.

"There is a single species that is responsible for the C 19 pandemic – us. As with the climate and biodiversity crises, recent pandemics are a direct consequence of human activity – particularly our global financial and economic systems, based on a limited paradigm that prizes economic growth at any cost. We have a small window of opportunity, in overcoming the challenges of the current crisis, to avoid sowing the seeds of future ones," the authors wrote on IPBES.

The authors of the report include the three co-chairs of the comprehensive 2019 IPBES Global Assessment Report on Biodiversity and Ecosystem Services, which found that one million species of plants and animals are at risk of extinction within decades. The fourth author, Peter Daszak, is the president of EcoHealth Alliance and is tasked with spearheading the IPBES' next global assessment, as The Guardian reported.

The authors argue that government stimulus plans need to include sustainable and nature-positive initiatives.

"It may be politically expedient at this time to relax environmental standards and to prop up industries such as intensive agriculture, long-distance transportation such as the airlines, and fossil-fuel-dependent energy sectors, but doing so without requiring urgent and fundamental change, essentially subsidizes the emergence of future pandemics," the authors wrote.

They also fault wanton greed for allowing microbes that lead to novel diseases to jump from animals to humans.

"Rampant deforestation, uncontrolled expansion of agriculture, intensive farming, mining and infrastructure development, as well as the exploitation of wild species have created a 'perfect storm' for the spillover of diseases from wildlife to people," they wrote in their article.

They warn that 1.7 million unidentified viruses known to infect people are estimated to exist in mammals and water birds. Any one of these may be more disruptive and lethal than C 19.

With that in mind, the authors suggest three facets that should be considered for C 19-related stimulus plans. Countries should strengthen environmental regulations; adopt a 'One Health' approach to decision-making that recognizes complex interconnections among the health of people, animals, plants, and our shared environment; and prop up healthcare systems in the most vulnerable countries where resources are strained and underfunded. "This is not simple altruism – it is vital investment in the interests of all to prevent future global outbreaks," the scientists argue in their IPBES article.

"The programs we're talking about will cost tens of billions of dollars a year," Daszak told The Guardian. "But if you get one pandemic, even just one a century, that costs trillions, so you still come out with an incredibly good return on investment.

"Business as usual will not work. Business as usual right now for pandemics is waiting for them to emerge and hoping for a vaccine. That's not a good strategy. We need to deal with the underlying drivers."

Their assessment has been supported recently by others in the scientific community. A study published earlier this month blamed human impact on wildlife for the current outbreak, as The Guardian reported.

The authors of the new article end their piece on an optimistic note about nature's resiliency. "We can build back better and emerge from the current crisis stronger and more resilient than ever – but to do so means choosing policies and actions that protect nature – so that nature can help to protect us," they wrote.

--https://www.weforum.org/agenda/2020/05/scientists-pandemics-CV-nature-C 19-health/?utm_source=sfmc&utm_medium=email&utm_campaign=2718479_Agenda_weekly-8May2020&utm_term=&emailType=Newsletter

Climate Change Hollywood Whores: Robert De Niro, Madonna, Cate Blanchett, and Others Call for Politicians to Avoid the "Return to Normal"

These are Hollywood actors with the morality of a porn star, and the talent of a circus freak show act. Why should I listen to them about anything?

More than 200 high-profile actors and creatives have joined scientists in an open letter urging politicians to systematically upend life after the CV to avoid "ecological disaster".

Robert De Niro, Madonna, Cate Blanchett and others have signed the editorial 'No To A Return To Normal' published in Le Monde yesterday (May 6) that calls on world leaders and citizens "to undertake a profound overhaul of our goals, values, and economies," in the wake of C 19.

The letter, which was written by Academy Award-winning French actress Juliette Binoche and astrophysicist Aurélien Barrau, states that the pandemic is "inviting us to examine what is essential. And what we see is simple: 'adjustments' are not enough. The problem is systemic."

It warns that "the massive extinction of life on Earth is no longer in doubt, and all indicators point to a direct existential threat. Unlike a pandemic, however severe, a global ecological collapse will have immeasurable consequences."

They also point to the "pursuit of consumerism" and "an obsession with productivity" which has "led us to deny the value of life itself." They add: "We believe it is unthinkable to 'go back to normal,'" as the C 19 outbreak eases.

Adam Driver, Willem Dafoe, Rooney Mara, Penelope Cruz, Hirokazu Kore-eda, Alejandro G Inarritu, Paolo Sorrentino, Mikhail Baryshnikov, Pedro Almodovar, Guillaume Canet, Nathalie Baye and Monica Bellucci are among the others who have lent their signatures to the letter.

Here's the Text in Full:

"The C 19 pandemic is a tragedy. This crisis is, however, inviting us to examine what is essential. And what we see is simple: "adjustments" are not enough. The problem is systemic.

The ongoing ecological catastrophe is a meta-crisis: the massive extinction of life on Earth is no longer in doubt, and all indicators point to a direct existential threat. Unlike a pandemic, however severe, a global ecological collapse will have immeasurable consequences.

We therefore solemnly call upon leaders — and all of us as citizens – to leave behind the unsustainable logic that still prevails and to undertake a profound overhaul of our goals, values, and economies.

The pursuit of consumerism and an obsession with productivity have led us to deny the value of life itself: that of plants, that of animals, and that of a great number of human beings. Pollution, climate change,

and the destruction of our remaining natural zones has brought the world to a breaking point.

For these reasons, along with increasing social inequalities, we believe it is unthinkable to 'go back to normal'.

The radical transformation we need – at all levels – demands boldness and courage. It will not happen without a massive and determined commitment. We must act now. It is as much a matter of survival as one of dignity and coherence."

-- https://www.nme.com/news/film/robert-de-niro-madonna-lead-call-for-politicians-to-avoid-a-post-lockdown-return-to-normal-2661455

Tanzanian President John Magufuli Not Only Smells the Stupid-19 Rat, But Also Catches Rat In A Cleverly Baited Trap

From the article:

"CV test kits used in Tanzania were dismissed as faulty by President John Magufuli. The president instructed Tanzanian security forces to check the quality of the imported kits. They had randomly obtained several non-human samples, including from a pawpaw (papaya type fruit), a goat and a sheep, but had assigned them human names."

These samples were then submitted to Tanzania's laboratory to test for the CV, with the lab technicians left deliberately unaware of their origins. Samples from the pawpaw and the goat tested positive for C 19, the president said, adding this meant it was likely that some people were being tested positive when in fact they were not."

* We also learn from a BBC story that motor oil cells were tested and came back "inconclusive!"

You see that, boys, and girls, someone has been lacing the testing kits with CV, (not the first known case of this happening) and/or rigging the lab

reports. This is blockbuster stuff that ought to be front-paged top and center. Of course, the Slimes buried the story deep in its International Section instead.

--https://www.realhistorychannel.org/tanzanian-president-exposes-C19id?fbclid=IwAR2e57XC5vsb6fFHcQJmiJcDVde7R378phSCMlOxoz4XoaF2KH2q1yaUU_w

California Jettisons Scum Gavin Newsom

The Golden State tyrannical governor, Gavin Newsom, has a lot of explaining to do. But it may well be too little, too late to save his political career.

Across California on May 1, tens of thousands protested in defiance of statewide lockdown orders. In Sacramento, the west lawn of the state capitol building was filled with protesters, with thousands more marching along the sidewalk surrounding the capitol grounds. Additional thousands driving their cars and honking their horns created three hours of total gridlock on the streets that loop around the capitol. Noteworthy protests have taken place in San Diego, Encinitas, Laguna Beach, Huntington Beach, Paso Robles, Santa Rosa, and even tiny Lakeport on the shores of Clear Lake. There is no end in sight.

While the media has typecast these growing protests as populated by right-wing extremists, Trump supporters, and remnants of a geriatric Tea Party movement, the reality in California is different.

In Laguna Beach, the protest was organized by surfers. Overall, these protests included people who claimed never to have been involved in politics, people who identified themselves as former Democrats, and young people. Thousands and thousands of youth: children, teenagers, college students, twentysomethings. A generation is waking up.

And among the constituencies outraged by the shutdown are not only people who can’t work, or people who can’t run their businesses, or free

speech advocates, or defenders of the Second amendment, or anti-vaccine activists, but also devout Christians.

As perhaps the biggest and most politically neglected constituency in California, in poking Christians, Newsom may have poked a sleeping giant one time too many. An inflection point will be reached this month, as growing numbers of pastors in California and across the nation have declared they will open their churches to congregants.

Of course, the question boils down to this: is this health emergency sufficiently dire to merit an ongoing lockdown that has turned the entire nation into a minimum-security prison? And unfortunately, there isn't much information available to Americans that doesn't come with an agenda.

Why have the data on death rates been skewed upwards? Why have social media and search monopolies suppressed contrarian information, such as the possible efficacy of hydroxychloroquine, azithromycin, and zinc? Why can't general practitioners prescribe these drugs, or try other promising therapies, before the disease becomes life-threatening?

Questions are endless and urgent. Is there enough focus on therapies, along with trying to develop a vaccine? Why, at a time like this, has the media attacked every move by the president, while defending every move by Democrats? Why is the media defending the fascist regime of China? Why didn't Americans try the Swedish approach, encouraging social distancing and prioritizing resources to protect the most vulnerable? Why does the United States stand on the brink of economic suicide, when maybe, just maybe, other tactics could have managed the pandemic without destroying the economy?

It isn't unreasonable to ask these questions, and when the answers are unsatisfactory, anger grows.

Newsom's Record Invites Criticism

It's also not unreasonable to take issue with Newsom's performance as governor before this crisis began.

Apart from doing whatever the public employee unions and his left-wing billionaire donors tell him to do, he really hasn't pleased anyone. If you work as an independent contractor, Newsom put you out of a job by signing AB 5. This draconian and poorly conceived law, written for the state legislature by the unions, requires companies to hire independent contractors as employees. But that didn't happen. Instead, and in an instant, most of them lost their jobs.

How does that work, if you're a "nonessential" writer, musician, or artist, or, more to the point, an "essential" nurse, caregiver, or truck driver? Essential or nonessential, workers need to work. With one signature, Newsom robbed millions of Californians of that right. And that was before the pandemic hit.

And then there's California's 150,000 homeless, now seeded with tens of thousands of criminals granted early release to relieve jail overcrowding or released because in California drug and theft crimes now carry less punishment than traffic tickets.

These homeless, some of them merely down on their luck, others hardened predators, have turned California's streets and sidewalks into a public toilet, with many of them stealing to support their drug habits, and none of them held remotely accountable for their behavior. They could have been rounded up and treated, overnight. The national guard could move them onto public land and help them reC 19er. The homeless constituted a health emergency in California before the pandemic hit.

So why is it Newsom could lock up nearly 40 million residents of his state, at the same time as he lets the homeless consolidate their control of entire cities? Could it be that the homeless are a useful political tool? Never mind that Democratic policies created unaffordable housing, decriminalized petty theft and hard drugs, and emptied the jails.

Now the Democrats' allies in the media and the well-heeled nonprofits can point their cameras at these squalid "urban refugees" and scream "social injustice." Taxes must be raised. Bureaucrats must be hired. Massive borrowing must be approved for affordable housing bonds. And developers make tens of

billions, building a handful of palaces for a lucky few, solving nothing, at an average cost to the taxpayer of $500,000 per unit.

One of Newsom's Democratic cronies, Los Angeles Mayor Eric Garcetti, presides over a city council that is considering using federal bailout money to buy up homes where landlords have been prohibited from evicting tenants.

Let that sink in. Instead of using federal bailout money to help tenants pay rent, the Los Angeles City Council is poised to wait until the small landlords go belly-up so it can buy their live-in duplexes and triplexes out of foreclosure, evict them, and fill those homes with homeless people. Eventually, their developer friends will consolidate the properties and demolish them to build high rises. You can't make this stuff up.

Newsom can blame the pandemic for the imploding revenues that doom his state to budget deficits that will make the great recession look like a picnic, but voters should see right through that.

Did Gavin Newsom ever stand up to the teacher's unions, and tell them they'll never get another dime until they agree to reform CalSTRS, the teachers' pension fund? No, but he let these unions successfully advocate for curricula that, among other things, "challenges binary concepts about gender" in third grade.

Did Gavin Newsom ever put forward a pension reform measure to save CalPERS, the largest public employee pension fund in the world, along with CalSTRS and dozens of other pension systems catering to California's public employees? No. Everybody knew these pension funds were bankrupting California's cities and counties and state agencies before the pandemic hit.

With a record like that, you'd think Governor Newsom would realize he is on thin ice. But how did he cope with the pandemic? He became King Newsom, issuing executive orders without consulting the legislature. He even spent $1 billion of taxpayer money to buy masks from a Chinese company. The public still doesn't have the details of that transaction.

Newsom's CV "task force" is led by billionaire Tom Steyer, who when he isn't paying for Democrats' ballot harvesting, wants to save the planet by forcing Californians to live in small apartments and ride trains everywhere. Joining Steyer on Newsom's dream team are dozens of other grandees, including none other than the disgraced Gray Davis, who may take comfort in knowing he may not have long to be the only California governor to be recalled.

A few months ago, a ragtag team of volunteers, with no money and little previous experience in politics, gathered nearly 300,000 valid signatures in a failed attempt to recall Gavin Newsom. While this wasn't even close to the just over one million signatures they needed, nonetheless it was an unprecedented accomplishment. They learned a lot, and now they're trying again, this time with the ability to ride the momentum of an awakened electorate.

Have you lost your business? Have you lost your job? Do you think it was worth it, or do you think things could have been handled differently?

--https://amgreatness.com/2020/05/07/california-is-ready-to-get-rid-of-gavin-newsom/

Fauci and the Bill vs. Pinky and the Brain

Pinky: "Gee Brain, what are we gonna do tonight?"

Brain: "The same thing we do every night, try to take over the world!"

Fauci: "Gee Bill, what are we gonna do tonight?"

Bill: "The same thing we do every night, try to take over the world!"

Pre-Crime (Pre-C 19) Minority Report

The thing to understand about the lockdown is that you are not under quarantine. A quarantine is for sick people. You are actually under house arrest. If you are under lockdown without being sick, you are under house arrest.

Lockdown under the suspicion of getting sick in the FUTURE is nothing but a Minority Report form of jail.

1.) The Future is Assumed
2.) You Are Identified on Future Suspicion of Infection
3.) The Guilty are Punished Before the Crime is Committed
4.) Nevertheless. Less than .003% have ALLEGEDLY Died, Worldwide, from C 19, Which Makes it is Far Less Dangerous Than the Common Flu

1) So now the while idea is to test someone to see if they may be infectious, even though the test is 80% false positive, so they are really useless, ultimately. But, if there is any suspicion you may have been infected with C 19, you will be tracked down and forced into quarantine, and ultimately, forced to take the Vaccination. And if the Artificial Intelligence Contagion tracking system determines that you have been in contact or proximity of someone who might have been infected, you are treated as an infected person and handled accordingly.
2) Does everyone see how our world is turning into the movie, Minority Report on steroids? In Minority Report, they use a system called Pre-Crime to identify POTENTIAL CRIMINALS, in order to apprehend them BEFORE they have committed any crime. They were merely suspected of committing a crime in the future.
3) This is exactly what we are seeing with this C 19. If you ARE SUSPECTED of being infected and identified by an almost useless 80% false positive test, you are handled accordingly.
4) We have a new Pre-Crime system and it is called Pre-C 19.

Teachers Want Kids Disinfected at School Gates Amid Fears of Enforcing Social Distancing

Teaching unions have expressed serious concerns if some children return to school on June 1 - with one asking how you enforce stringent social distancing measures with five-year-olds

Teachers have suggested spraying pupils with disinfectant at the school gates amid fears of how to enforce social distancing rules among young children.

Primary school students could start returning to school in England from June 1 - but the majority of secondary school pupils will not attend class until September at the earliest.

Boris Johnson said the start of June was the earliest possible date to consider the phased reopening of schools, beginning with some of the youngest pupils in reception classes, year one and year six.

But even this staggered approach caused alarm, with the leader of the largest teaching union calling it "reckless".

Blasting the plans, Dr Mary Bousted, joint general secretary of the NEU, suggested we should follow schools in China and South Korea where 'children stand outside the school gates and are sprayed front and back with disinfectant'.

And another union raised concerns about how social distancing can be managed with younger children.

Infection control measures being taken in schools in Cannes, France, as English schools could see some pupils returning next month (Image: SIPA USA/PA Images)

Dr Mary Bousted, joint general secretary of the NEU, said: "We think that the announcement by the Government that schools may reopen from June 1 with reception and years one and six is nothing short of reckless.

" CV continues to ravage communities in the UK and the rate of C 19 infection is still far too great for the wider opening of our schools."

According to the Sun, Dr Bousted added: "In China, children stand outside the school gates and are sprayed front and back with disinfectant, their shoes are sprayed, they wash their hands with sanitizer, they must take off their mask and replace it with a new one, and their temperature is taken remotely."

Asked if a similar regime should be introduced here, she said: "Yes. They're doing that in China and South Korea and they have a minuscule number of new cases."

--https://www.mirror.co.uk/news/uk-news/teachers-want-kids-disinfected-school-22007383?fbclid=IwAR2e3nIXhVa60dGbYjUyO7H5DA2MgzIoytymFh42kcGDTm1z0eYYdr_BrtE

Why Google, Facebook, and You Tube are Censoring "Misinformation" About C 19

Seems Anthony Fauci, Bill Gates, Susan & Anne Wojcicki, & Mark Zuckerberg have their hands very deep in the C 19 pocket & that's why FB, Google, & YouTube are censoring "misinformation". researched this in approximately a 3 hr period. Imagine what a real investigation would turn up

NIH director of Infectious Diseases is Dr Tony Fauci. Back in 2015 Fauci wanted a grant to give to the Wuhan lab for virology studies. The Obama administration prohibited the $3.7 million grant. So Fauci turned around and outsourced this $3.7 million through Eco Alliance which funded the Wuhan lab specifically to study the CV.

Keep in Mind... back in 2017 Fauci stated that the Future President (Trump administration) will see a pandemic outbreak). How on earth can you predict that unless you have a hand in it!!! Let's delve a little deeper....

So how does Dr Tony Fauci know Bill Gates? He just happens to sit on the leadership board of the Bill & Melinda Gates Foundation.

Mark Zuckerberg & his wife Priscilla Chan also have a philanthropy organization called CZI (Chan-Zuckerberg Institute). In 2018 CZI & The Bill & Melinda Gates Foundation "began jointly exploring whether breakthrough education solutions can be developed through an accelerated disC 19ery and development effort"

Mark Zuckerberg & his wife's company's CZI pledged $25 million dollars to the BMGF for Gate's program that will be an "accelerator for developing therapies and medicine to treat C 19."

Remember Dr Fauci sits on the leadership board of the BMGF.

On March 19th, 2020 Mark Zuckerberg interviewed Dr Fauci on FB about C 19 & the importance of social distancing.

Mark Zuckerberg & his wife Priscilla Chan; also happened to help create The Breakthrough Prize which is devised of tech billionaires that give away six $3 million dollar prizes annually to "scientists working on curing "intractable diseases" and extending human life". Other benefactors of the Breakthrough Prize are Susan & Anne Wojcicki & Sergey Brin.

Susan Wojcicki is the CEO of YouTube while her sister Anne Wojcicki is the CEO of 23&Me. Now Susan has been around the block with some really big names. She rented out her garage to Larry Page & Sergey Brin back in 1998 as an office for a startup company called Google. Susan went on to marry Larry Page & her sister Anne married Sergey Brin. Susan did divorce Larry Page & is now married to a top Google exec named Dennis Troper. Anne Wojcicki is still married to Sergey Brin. Now what's really interesting is 23&Me is a company that collects DNA for genetically linking lineage AND a predisposition for diseases. 23&Me is sitting on one the biggest DNA banks in the world.

Edit: was asked to share with references links:

- **https://nymag.com/news/features/23andme-2014-4/**
- **https://www.google.com/…/chan-zuckerberg-initiative-commits…**

- **https://www.google.com/…/mark-zuckerbergs-philanthropi…/amp/**
- **https://www.google.com/…/mark-zuckerbergs-philanthropi…/amp/**
- **https://www.google.com/…/tech-ceos-wives-husbands-marriages…**
- **https://www.forbes.com/profile/susan-wojcicki/#f19f2f63ae33**
- **https://www.google.com/…/trump-cuts-research-bat-human-viru…**
- **https://www.forbes.com/profile/sergey-brin/#243a5b094b43**
- **https://www.ecohealthalliance.org/…/regarding-nih-terminati…**

--Sony Pandey

The Similarity Between C 19-ID and ID2020 Is Not A Coincidence

This pandemic has been planned to take over Humanity, while humanity remains in sleep state!

Elites want Global Governance -"NEW WORLD ORDER"! They have been planning this for decades... the Goal remains the same, only the players are changing!

Again this video clearly tells us that it's not about being pro vaccine or anti vaccine! It's not about being a Democrat or Republican! It's about how corrupt the medical and political system has become, and who is pulling the shots!

Not sure why people are not asking themselves these questions, and I think we are at the crossroads where humanity could either go back 1000 years in the dark ages because of our fearful-ostrich mentality, or we as human could take a leap in awakening our consciousness! Choice is yours to take!

This is not about the pandemic, this is not about CV, this is about "New World Order", and this is not a conspiracy theory once again, this is what we are heading towards!

The desperation of Bill and Melinda Gates has become very obvious in recent interviews, they want the world vaccinated fast! THIS IS THE MARK OF THE BEAST! Sounds ridiculous, but feel free to do your own research!

--Sony Pandey

Pre-emptive Programming

Finally the script has been given to the politicians and law enforcement officers to prepare us for the "New World Order"... Preemptive Programming at its best!

For those who are not familiar with Preemptive Programming... here is a little explanation!

When you have an Agenda in place already... everything is planned and ready to be executed, but you don't want to release it to the public, as this could cause unrest and panic amongst majority, as many can see through the game plan!

What do you do in such a situation?

The Agenda makers use preemptive programming to prepare and program our mind, especially the subconscious mind, with the new idea they want to execute!

It's a Psychological groundwork for any pre planned agenda or program by planting images, videos, words in popular media!

The Elites/Illuminati's/Deep State are ready with the plan for "New World Order"... but if they disclose the horrific details, there will be social unrest in the society!

Another example is Vaccines! The big pharmaceutical companies who are partners in crime with the Elites for their New World Agenda are already

ready with the vaccines (I am not an anti-vaccine person once again - this is not your usual vaccine)!

But if they disclose the bigger agenda behind the vaccine, the world might question, "How did these pharmacists companies manufacture CV vaccine prior to the pandemic?", and this would create worldwide panic!

That's why they use preemptive programming to program us!

And this is how they do it... when everyone talks about the vaccine in political discussions, social media, news media, anywhere and everywhere... they plant a seed in our subconscious Mind... that we need this vaccine! The conscious mind might have ignored or rejected the idea, but the subconscious and the unconscious mind which is like a hard drive has registered the idea in some corner!

This is Preemptive programming at its best... and the guru of Mind programming for the "Mark of the Beast" is Bill Gates!

The Elites want to track each one of us for Power and Control... they cannot tell us about the bigger agenda (which has already been planned)... one of them is that they will chip each and every individual on this planet!

If they disclose this now, this may cause a social unrest... so what do they do...

They...

CREATE A PROBLEM (PANDEMIC) FOR WHICH THE SOLUTION ALREADY EXISTS (VACCINES and TRACKING)

AND THEN THEY PROGRAM YOU INTO BELIEVING THAT "XYZ" IS THE SOLUTION (VACCINES),

THEN WITHOUT ANY SOCIAL UNREST, WE ALL APPROVE, INFACT WAIT FOR THEM TO SAVE THE WORLD!

--Sony Pandey

Why We Are We Being Programmed to Believe That Life Cannot Go Back to Normal?

Why are all the news channels, social media, World Health Organization, the Elites, the Bill Gates, to Hollywood Celebrities and A listers, continuously programming our subconscious with what's Essential, and what's Non Essential???

WHY IS THIS SUDDEN URGE TO END CONSUMERISM?

It seems we are being told that all the progress we made till now was useless; that we have destroyed the Earth, it's resources, polluted the air and water, destroyed the forests, overcrowded the earth causing more carbon footprints... we humans are evil, we caused Global warming!

And I don't disagree with anything!

But there is something very fishy about everything that's been programmed in our subconscious Mind! The whole narration looks like a very big Agenda!

Remember the poster child of the Elites for Global warming, Greta Thurnberg... ever wondered why the Rockefeller's, George Soros, and other Elites were backing her!

If you remember, she took the carbon neutral boat to attend the UN session in US... as per Greta... oops I should say Elites... airplane and the automobile have democratized travel, and Greta... oops, the Elites wants to take that away from us.

As per UN's Agenda 21 (hiding behind Agenda 30), the elites want to control and regulate how you travel, and how you heat your home! They want to control what you eat and how you breed, too.

Agenda 21 is nothing but the U.N. One World Government plan by the Elites who control the UN!

The Elites have been planning a transition to a One World Government for decades, and for decades world leaders have been busy preparing for it.

Not only they want control over us, they want to program your children too, a programmed child is easy to control!

Recently I read an article about Melinda Gates new initiative.

Melinda Gates wants "To ensure a fast and inclusive reC 19ery, governments, business leaders and investors need to make caregiving a priority."

And this is how the Elites will achieve their Agenda 21 goal, of control and power by 0.0001% people over 7.8 billion people... by Mind fuck or call it Mind Control by using predictive programming elements like, Agenda 21, Climate Change, Veganism, Transgender Agendas and many more!

This article was published in Daily Mail, "Madonna and Robert de Niro join 200 celebrities and scientists calling for the world not to 'return to normal' after C 19 lockdowns and stop 'the pursuit of consumerism' "

Suddenly all this rich and famous have been telling the world to stop consumerism, and enter a society of sustainable development, where Elites will control what you say, what you think, what you eat, how much energy you can consume! Besides this they are planning to take away your land, home, cars, and planning to put us all in cramped houses!

And this is what Global Elites and UN is pushing for from decades! This Pandemic is their golden opportunity to get the ball rolling!

This pandemic is a global siege by the Elites, the 0.0001%, to kill small businesses, and put us all on Universal basic income, and move us out of our homes, and put us in small camps in the city! All this in the name of saving the planet!

We don't need Agenda's by control freak psychopaths to take care of this planet, what humanity needs most at this time is Awareness, Oneness, Love to take care of this Earth!

--Sony Pandey

George Soros And Bill Gates Funding Facebook's Fact Checkers

Social media giant Facebook has announced that its fight against fake news will involve third-party fact checking organizations, however there are grave concerns about the legitimacy of those groups after it was revealed George Soros and Bill Gates, as well as other Clinton donors are funding the fact checking drive.

Many people are taking it for granted that these fact checkers are the quintessence of neutrality and unbiased reporting. Well, judge for yourself.

Facebook released a statement on December 15 advising users that they were starting a program to "work with third-party fact checking organizations that are signatories of Poynter's International Fact Checking Code of Principles (IFCN)".

Here's an interesting fact about Poynter, the self-proclaimed "global leader in journalism". They are funded by George Soros' Open Society Foundations, The Bill & Melinda Gates Foundation, the National Endowment for Democracy (which has financial links to the State Department), Ebay's Omidyar Foundation, and Craig Newmark, the founder of Craigslist who donated a massive $1 million to Poynter to create this anti fake news mechanism.

But it gets even worse.

Craig Newmark is also a Clinton campaign donor. As is George Soros and Bill Gates, both big time supporters of the Clinton Foundation as well as Hillary's election campaign fund. And another Poynter donor, Ebay founder Pierre Omidyar, is also a massive donor to Clinton, giving millions of dollars to the Foundation.

Danish journalist, Iben Thranholm, said she was shocked that such obviously partisan fact checkers would be allowed to control the narrative in United States politics. “It gave me goosebumps to hear those names because they have actually a very strong political agenda. It’s like there are a lot of people who think that its dangerous not to be able to control the media, so to sort out what is supposedly the real news and the fake news is actually a way to control the narrative. So if you want to be in opposition to these political powers then you are going to be censored. Of course this is a kind of censorship.”

Welcome to 1984’s Ministry of Truth, where only selected facts are allowed to exist while other facts that don’t fit Washington’s neoliberal narrative will be labelled “fake news” and suppressed.

--https://newspunch.com/george-soros-bill-gates-facebooks-fact-checkers/?fbclid=IwAR1OyKUZq-sykYJKLOO4Ps87MIjPdjSykI64Sco7uMyoaOGu7fFu5ZPhst8

CBS This Morning Reports Faked C 19 Line of Cars Driving Through Drive-Through Testing Site

A CBS News crew pulled medical professionals off the floor at the Cherry Medical Center in Grand Rapids, Michigan, to line up in their vehicles so a CBS film crew would have a long line for their C 19 C 19erage.

- 'We Could Have Done Other Stuff,” Registered Nurse complains.
- ‘Apparently, the news crew wanted more people in the line,’ said a Cherry Health Supervisor.
- “There were a couple of real patients, which made it worse,” said Another Registered Nurse.

[Mamaroneck, N.Y.—May 6, 2020] A CBS News crew pulled medical professionals off the floor at the Cherry Medical Center in Grand Rapids, Michigan, to line up in their vehicles so a CBS film crew would have a long line for their C 19 C 19erage.

"Our insider witnessed the whole thing and came to Project Veritas, because he knew we would protect him," said James O'Keefe, the founder and CEO of Project Veritas.

"The insider told us that medical personnel were taken away from treating patients and making the line longer for actual patients wait for the C 19 test," he said.

In an interview with the insider, O'Keefe asked the insider: "You're telling me you're a hundred percent certain that CBS News, CBS News Corporation--national, staged a fake event. They faked the news. They faked the reality and broadcasted that to all of their audience last Friday on "CBS This Morning."

The insider said to him: "A hundred percent. Absolutely."

Nick Ross, a corporate cleaning site supervisor at the Cherry Health facility, said he was there when the CBS News crew arrived and set up the video shoot at the C 19 testing site in the parking lot, "Apparently the news crew wanted more people in the line because they knew it was scheduled."

Maria Hernandez-Vaquez, a professional registration specialist, told the insider that Cherry Health Director of Quality and Informatics Glenda Walker helped to organize the facility's workers into the C 19 testing line.

"It's just annoying cause we could have done other stuff," said one registered nurse there recorded with a hidden camera by a Project Veritas insider.

The nurse said personnel at the medical center were given the heads-up to expect the CBS News crew. "We knew they were coming. We had no clue that we're going to have to, like, do fake patients."

Another registered nurse said she and other medical professionals working the drive-through testing site did not administer the actual swab swipe as CBS News was filming, but the actual patients were made to wait longer because of the manufactured line. "There were a couple of real patients, which made it worse."

The footage was used to accompany CBS News reporter Andriana Diaz's narration and interview with Tasha Blackmon, the president, and CEO of Cherry Health.

In the CBS News report, Blackmon told her facility needed gowns and N95 masks, which filter incoming breath to protect the medical professional.

Cherry Health President and CEO Tasha Blackmon told Project Veritas in a phone conversation: "We and CBS News had nothing to do with that line."

Blackmon said she had not viewed the preview of the Project Veritas report that had been emailed to her, and that after reviewing the matter with her team, she would give Project Veritas a statement. Project Veritas followed up with phone calls and emails, but there was no further response before the deadline.

Project Veritas also spoke to CBS News President Susan Zirinsky, who agreed to review a preview of the report and send a statement.

The CBS News statement reads in full:

CBS News did not stage anything at the Cherry Health facility. Any suggestion to the contrary is 100% false. These allegations are alarming. We reached out to Cherry Health to address them immediately. They informed us for the first time that one of their chief officers told at least one staffer to get in the testing line along with real patients. No one from CBS News had any knowledge of this before tonight. They also said that their actions did not prevent any actual patients from being tested. We take the accuracy of our reporting very seriously and we are removing the Cherry Health portion from the piece.

"CBS This Morning" Executive Producer Diana Miller gave an interview to her parent company's website Viacom.com, where she said the morning TV news show was making its C 19erage of the C 19 pandemic a priority.

"Whenever you're chasing a story that's developing, there are threads that emerge. Focusing on first responders has been important for us because they are on the frontlines, and it's important we're showing the reality of the situations they are in every day," she said.

"We've always been driven by the news and want to provide context and clarity on the important stories of the day," Miller said.

https://www.projectveritas.com/news/cbs-news-this-morning-aired-faked-C 19-drive-through-testing-site-line/

Chapter 7
The Hopium of the Masses

It is "We the People", not “We the Technocratic Elite”

"The Founding Fathers established a system which meant a radical break from that which preceded it. A written constitution would provide a permanent form of government, limited in scope, but effective in providing both liberty and order. Government was not to be a matter of self-appointed rulers, governing by whim or harsh ideology. It was not to be government by the strongest or for the few. Our principles were (counter)revolutionary. We began as a small, weak republic. But we survived. Our example inspired others, imperfectly at times, but it inspired them, nevertheless. This Constitutional Republic, conceived in liberty and dedicated to the proposition that all men are created equal, prospered and grew strong. To this day, America is still the abiding alternative to tyranny. That is our purpose in the world -- nothing more and nothing less.”

— Ronald Reagan (1911-2004) 40th President of the United States

Plandemic The Movie

Humanity is imprisoned by a killer pandemic. People are being arrested for surfing in the ocean and meditating in nature. Nations are collapsing. Hungry citizens are rioting for food. The media has generated so much confusion and fear that people are begging for salvation in a syringe. Billionaire patent owners are pushing for globally mandated vaccines. Anyone who refuses to be injected with experimental poisons will be prohibited from travel,

education, and work. No, this is not a synopsis for a new horror movie. This is our current reality.

Let's back up to address how we got here...

In the early 1900s, America's first Billionaire, John D. Rockefeller bought a German pharmaceutical company that would later assist Hitler to implement his eugenics-based vision by manufacturing chemicals and poisons for war. Rockefeller wanted to eliminate the competitors of Western medicine, so he submitted a report to Congress declaring that there were too many doctors and medical schools in America, and that all-natural healing modalities were unscientific quackery. Rockefeller called for the standardization of medical education, whereby only his organization be allowed to grant medical school licenses in the US. And so began the practice of immune suppressive, synthetic, and toxic drugs. Once people had become dependent on this new system and the addictive drugs it provided, the system switched to a paid program, creating lifelong customers for the Rockefellers. Currently, medical error is the third leading cause of death in the US. Rockefeller's secret weapon to success was the strategy known as, "problem-reaction-solution." Create a problem, escalate fear, then offer a pre-planned solution. Sound familiar?

Flash forward to 2020...

They named it C 19. Our leaders of world health predicted millions would die. The National Guard was deployed. Makeshift hospitals were erected to care for a massive overflow of patients. Mass graves were dug. Terrifying news reports had people everywhere seeking shelter to avoid contact. The plan was unfolding with diabolical precision, but the masters of the Pandemic underestimated one thing... the people. Medical professionals and every-day citizens are sharing critical information online. The overlords of big tech have ordered all dissenting voices to be silenced and banned, but they are too late. The slumbering masses are awake and aware that something is not right. Quarantine has provided the missing element: time. Suddenly, our overworked citizenry has ample time to research and investigate for themselves. Once you see, you can't unsee.

The window of opportunity is open like never before. For the first time in human history, we have the world's attention. Plandemic will expose the scientific and political elite who run the scam that is our global health system, while laying out a new plan; a plan that allows all of humanity to reconnect with healing forces of nature. 2020 is the code for perfect vision. It is also the year that will go down in history as the moment we finally opened our eyes.

--https://plandemicmovie.com/

For Those Who Doubt the Plandemic Movie

There are "facts" going around claiming to have "debunked" the movie, which are being regurgitated by many who prefer to remain asleep and won't put the effort in to research things themselves. Here is what I found along with all of my supporting sources.

1. Dr. Anthony Fauci has worked at the National Institute of Health (NIH) since 1968 and has been a Director with the organization since 1984, "both as a scientist and as the head of the NIAID at the NIH". A simple Wikipedia search resolved that one.

--https://en.wikipedia.org/wiki/Anthony_Fauci

2. The NIH was one of the institutions funding the original study published in 10/23/2009, which Dr. Mikovits participated in and makes reference to in the Plandemic movie. Dr. Fauci worked at and continues to work at the NIH, one of the primary financial contributors to the study as one of its most senior directors, so you can indeed say that Dr. Judy Mikovits was in fact working for Dr. Fauci. I have downloaded the complete original study and saved for you to access here (highlights on page 3 denote Dr. Judy Mikovits's participation and her employing firm) (highlights on page 6 indicate the institutions which provided the funding for the study):

--https://drive.google.com/open…

3. The study was challenged in 2010, when other researches could not replicate their findings and in September 2010, the original team, inclusive of Dr. Judy Mikovits issued an official response supporting their work.

--https://drive.google.com/open…

4. After which the original study was partially and then subsequently fully retracted (a very rare move in science). The partial retraction document states that two of the co-authors, Robert Silverman and Das Gupta (whom the original study listed as working for the Department of Cancer Biology) re-analyzed the samples they used and disC 19ered that they had been contaminated. Please refer back to the first link provided herein, for item #1 showing the original study, indicates on the document that it has since been retracted.

5. That she was arrested and a quote from the prosecuting district attorney, that said the charges were dropped because "there were issues with the witnesses".

--https://www.sciencemag.org/…/criminal-charges-dropped-again…

6. In September 2012, Dr. Judy Mikovits and a team of other scientists conducted another study replicating the original one and published their findings, ultimately resolving the scientific communities dispute over the original work.

--https://twp.duke.edu/…/files/file-attachments/1441.full_.pdf

--https://www.sciencemag.org/…/final-study-confirms-virus-not…

--https://mbio.asm.org/content/3/5/e00266-12

7. As previously shared in another post, Dr. Fauci does in fact hold a large number of patents related to HIV (as Dr. Judy Mikovits states in the video). He also holds numerous patents related to the Novel CV.

--https://patents.justia.com/search?q=Anthony+Fauci

--https://www.wsj.com/articles/SB113383825463714813

Other Interesting and Related Facts:

The Bill and Melinda Gates Foundation has appointed Dr. Anthony Fauci to their Vaccination Action Plan.

--https://www.gatesfoundation.org/…/Global-Health-Leaders-Lau…

Bill Gates personally owns a number vaccine related patents (amongst many other interesting and unrelated patents):

--https://patents.justia.com/inventor/william-gates

Pirbright, a company funded by The Bill and Melinda Gates Foundation owns European protecting replication of a variant gene of an avian infectious bronchitis virus.

--European Patent# 3 172 319 B1 https://data.epo.org/publication-server/pdf-document…

Here is proof that Pirbright is in fact funded by The Bill and Melinda Gates Foundation

--https://www.gatesfoundation.org/…/Grants-Database/Grants/20…

Pirbright also a US patent on the CV (you will need to scroll down quite a bit to see the owner and inventor they really C 19ered every base on this patent.

--https://patents.justia.com/patent/10130701

Vanderbilt University owns a large number of CV vaccine patents:

--https://patents.justia.com/patent/7452542

Dr. Anthony Fauci and the Director of Vanderbilt University go back.

--Here you see them lobbying together: https://news.vumc.org/tag/anthony-fauci/

Here it mentions how they went to college together:

--https://news.vumc.org/tag/anthony-fauci/

Also as previously shared in another post, the polio vaccines the Bill and Melinda Gates Foundation tested on children in the Africa, causing an outbreak of Polio from the vaccine itself and paralysis on the children.

--https://thebulletin.org/…/vaccine-causing-polio-in-africa-…/

--Juls Hamrick

Dr. Judy Mikovits Proved That Vaccines Contain Neurotoxins, Retroviruses, and Aborted Fetal Tissue

For those who watched the PLANdemic video about Dr. Judy Mikovits before You Tube censored it, you do realize that the virologist was arrested because she published a paper proving autism, cancer, Parkinson's Disease, MS, and chronic fatigue are caused by vaccines containing retroviruses and aborted fetal tissue, and she publicly stated that the flu shot was contaminated with CVes?

She specifically said she is not anti-vaccine but simply wants clean, ethical, safe, and effective vaccines.

Link to paper: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3073172/

Vaccines contain neurotoxins like thimerosal/mercury and aluminum, carcinogens like formaldehyde, tumorigenic aborted fetal tissue like MRC-5 and WI-38:

--https://www.cdc.gov/…/do…/appendices/b/excipient-table-2.pdf

Influenza vaccine increases risk of respiratory illnesses, including CVes:

--https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3404712/

For those using fact checkers bought out by FB.... Sorry that doesn't count. Nor does Snopes.

--Rachelle Emery: https://www.facebook.com/profile.php?id=576448376

Petition: No Mandatory Vaccines for U. S. Citizens, No Mandatory Microchipping, No Mass Surveillance, Under Any Circumstances

In light of information today, as in the npr.org article, "Infectious Disease mutant Strains of Polio Vaccine Now Cause More Paralysis Than Wild Polio, June 28, 20173:22 PM ET", it is no longer acceptable to force the American people, who are supposed to be 'endowed with certain inalienable rights' such as 'life, liberty and the pursuit of happiness' according to our Declaration of Independence, to submit to vaccines against their will, which violates both liberty and life, as stated in The Indian Journal of Medical Ethics regarding the death of girls who received a Human Papilloma Virus vaccine from an American Foundation. Petition is to overturn all policies allowing mandatory vaccines & disallow mandatory microchipping or skin I.D's even in states of emergency & declarations of war.

--https://petitions.whitehouse.gov/petition/no-mandatory-vaccines-u-s-citizens-no-mandatory-microchipping-no-mass-surveillance-under-any-circumstances?fbclid=IwAR1kIn3eQkpIkZgLaiSFm1f2lI5VRGYTVW5CWbI7F0ckICRzkBW3cxtSYRE

410,000 People Sign White House Petition to Investigate Bill Gates for Medical Malpractice and Crimes Against Humanity

A petition to investigate Bill Gates for "crimes against humanity" and "medical malpractice" has amassed a staggering 410,000 signatures from concerned citizens, more than four times the number required for an official response from the White House.

The "We the People" petition asks the federal government to call on Congress to investigate the Bill and Melinda Gates Foundation, stating that "Congress and all other governing bodies are derelict in duty until a thorough and public inquiry is complete."

The petition created on April 10 reached the threshold of 100,000 signatures within days, meaning the White House should address the issue within 60 days.

The petition to investigate Bill and Melinda Gates for "crimes against humanity" and "medical malpractice" is currently one of the most popular petitions on the White House website.

As the White House "We the People" website explains, the petition platform empowers every American citizen "to become an agent of change" – and, if a petition gains 100,000 signatures in 30 days, the White House will "make sure it gets in front of the appropriate policy experts":

"We the People is a platform that empowers the American public to take this action like never before – it's a way for anybody, anywhere, to speak directly to the government and become an agent for change.

"With We the People, you can easily create a petition online, share it, and collect signatures. If you gather 100,000 signature in 30 days, we'll review

your petition, make sure it gets in front of the appropriate policy experts, and issue an official response."

Robert F. Kennedy Jr., the nephew of former President John F. Kennedy, has also sharply criticized Gates for what he describes as a "messianic conviction that he is ordained to save the world with technology."

Robert F. Kennedy Jr. dropped a truth bomb live on air, defying Big Pharma and mainstream media by sharing real facts about vaccine safety.

Robert F. Kennedy Jr. says Bill Gates has a "god-like willingness to experiment with the lives of lesser humans."

"Vaccines, for Bill Gates, are a strategic philanthropy that feed his many vaccine-related businesses (including Microsoft's ambition to control a global vac ID enterprise) and give him dictatorial control over global health policy—the spear tip of corporate neo-imperialism," Kennedy Jr. wrote.

"Gates' obsession with vaccines seems fueled by a messianic conviction that he is ordained to save the world with technology and a god-like willingness to experiment with the lives of lesser humans."

--https://newspunch.com/410000-people-sign-white-house-petition-investigate-bill-gates-crimes-against-humanity/?fbclid=IwAR1CGTmgUrE2DmXHLm7URYLwPFDcgZBWBFLad76ds1PtlGlYWtnOyibN72o

We Call For Investigations Into The "Bill & Melinda Gates Foundation" For Medical Malpractice and Crimes Against Humanity

As we look at events surrounding the "C 19 pandemic," various questions remain unanswered. On Oct. 18th of 2019, only weeks prior to ground zero being declared in Wuhan, China, two major events took place. One is "Event 201," the other is the "Military World Games," held in none

other than Wuhan. Since then a worldwide push for vaccines & biometric tracking has been initiated.

At the forefront of this is Bill Gates, who has publicly stated his interest in "reducing population growth" by 10-15%, by means of vaccination. Gates, UNICEF & WHO have already been credibly accused of intentionally sterilizing Kenyan children through the use of a hidden HCG antigen in tetanus vaccines.

Congress and all other governing bodies are derelict in duty until a thorough and public inquiry is complete.

--https://petitions.whitehouse.gov/petition/we-call-investigations-bill-melinda-gates-foundation-medical-malpractice-crimes-against-humanity

Capitalism's Perversion of Science and Medicine

A helpful reminder from Dr. Lynn Margulis regarding what true science is.

The thing that is most important about science is that it's a way of knowing that anyone can participate in, of course they have to have some background developed there, but it's at the end of any kind of science activity, people will agree that they have collected evidence that illustrates a hypothesis and if the evidence is contradictory to the hypothesis, one has to abandon that hypothesis and look for another one. And one must, in testing any hypothesis, or trying to establish it, consider all of the relevant evidence which can come from all kinds of places, observations, measurements, and so on, and so far as people can be objective at all, they will all come to the same sorts of conclusions. Science is a fundamentally useful and accurate and universal way of finding out about the world. So scientists collect information, data, observations, and measurements around an idea that's being tested for its validity and if all of these observations and measurements corroborate and are

consistent with the basic idea, the idea then has got to be published and be available in an open and transparent way that others can criticize.

If the hypothesis is really correct, the criticisms stand up, that is, a scientist has no better friend than valid appropriate critics to whom they respond and if the criticisms lead to abandonment of the hypothesis because the facts don't fit the idea then the hypothesis must be abandoned and replaced with something more adequate and as science goes on, the adequacy of the basic idea and hypothesis is corroborated over and over again by lots of people from lots of angles and usually generates sub hypothesis or related ideas that can also be investigated, but of course, science is never secret when it's done right. I would say that there's no bad science. There's just lots of things that are called science that aren't science because science is self-correcting and involves many people over and over again by the same observations or observations that are generated by the hypothesis itself. Anyway, these are rules that International scientific people all agree on. Science isn't science if it's not published and made available for criticism by anyone who feels they can criticize it."

There's a reason US citizens can't find truth. They are not taught the basic principles of reasoning and an introduction to the scientific method and most only receive information from one centralized source. The refusal to examine any additional evidence presented from additional sources is the best evidence that we are no longer living in a democracy at all. Many US citizens even refuse to examine any evidence that is counter to a national system of secrecy with zero transparency. Willful blindness to examining the interests of those in "authority." They easily fall prey to authority fallacy. The use of the term "national security" to conceal evidence from the working-class people who pay taxes and are the ones directly impacted by government laws and policies is the best evidence that democracy no longer exists and is only an illusion.

--Dr. Lynn Margulis has a PhD in genetics and was a member of both the National Academy of Science and the Russian academy of science. She was also awarded the National Medal of Science in 1999. https://renchemista.wordpress.com/2019/02/13/capitalisms-perversion-of-science/?fbclid=IwAR2U7TWCNQRd1aBB863URV2y1taTNl51SJ0VXjR-uTHNjzx35SWwaY0D0vs

Chapter 8

Viruses, Exosomes, Germ Theory, Vaccines, and the Immune System

Disease is NOT Caused by Viruses. Viruses Are Exosomes, Misidentified.

Definition of C 19

Whenever I use the term, "C 19", I mean 5G EMF Radiation, which when coupled with Metallurgical Chemtrail pollution, creates Radiation Sickness by over stressing the human body's respiratory system, creating oxidative stress, and provoking the body's natural immune system to over manufacture secretions of exosomes (viruses) to protect itself.

Nanotech is used to lock on to 5G and is essentially activated by 5G. Quite possibly, the nano tech delivery system is Chemtrails, as well as Vaccinations.

Viruses are the Result of Immune Deficiency: They do not Cause Disease

What if I told you that they didn't? Does HIV cause AIDS? Do immunizations prevent disease? Does anthrax, Ebola, E. Coli, the Hanta virus, smallpox, influenza, the West Nile virus, or any other so-called deadly pathogen cause sickness or pose any deadly threat whatsoever? What if I said the answers to all of these questions was no? What if I were to tell you that no matter how many sick people you come in contact with, you can't catch disease? Am I insane? Crazy? Nuts? The truth is, we've all been duped into believing a theory-the germ theory of disease-that just isn't true. We've all been tricked since birth into embracing the idea that when we are around someone who is sick, we can also become sick, regardless of how healthy we are at the time. Call it what you will-brainwashing, hypnosis, or whatever-this trickery runs so deep until we never notice all the times when we are around sick people and we don't catch their illnesses. We only remember the times when contagion appears to occur, and this only strengthens our belief in disease transmission. This belief, of course, is not true. We have been convinced of the existence of vampires and ghosts, and now, more than any other time in history, we must open our eyes and stop embracing the lies we are being told.

Scientists since the late 1800s, including Louis Pasteur, have all been part of a rather disorganized conspiracy to convince the public that the true cause of disease is pesky germs. Of course, there was no real conspiracy. Medical practitioners have also duped themselves into believing these deceptions just as much as they've duped us into believing their irrational propaganda. The germ theory of disease came on the heels of the Middle Ages when people believed that demons and evil spirits caused all diseases, so it wasn't that big of a transition to go from demons to microscopic bacteria. The belief in viruses came later, but they don't cause disease, either. Wait a minute! Am I saying that Ebola, HIV, and other viruses don't cause disease? Am I saying that anthrax,

pneumonia, and other diseases are not caused by bacteria? The answer to both questions is a resounding yes! Viruses and bacteria cause disease about as much as trees cause the wind to blow. It might look like this is the case, and that's why scientists have duped themselves into believing such a fallacy, but in truth, health is caused by healthy living. I can't transmit my bad health any more than I can transmit my good health. It's easy to blame germs, but what we should be doing is blaming ourselves when we get sick. We're responsible, and that's something a lot of people just don't want to hear.

I know what I've said so far is pretty hard to swallow. After all, you've believed all of your life that diseases are caused by bacteria and viruses. You've believed that the common cold is contagious, that the flu can only be prevented by vaccination, and that Ebola, AIDS, anthrax, and other dreaded diseases are highly lethal and to be avoided at all costs. But you've been tricked into believing all of these myths by a medical establishment that has been built upon the shaky foundation of the germ theory of disease. Combine this with the fact that the business of medicine is just that-a business, and a rather large and profitable one, to say the least-there's no mystery as to how an entire establishment of medical practitioners could fall prey to the same deceptions they have used to deceive us into believing in their scare tactics and lies.

It wasn't that long ago that a guy by the name of Louis Pasteur convinced an entire nation-and eventually, the entire world-to believe in his germ theory. Most people think of Pasteur as the guy who invented pasteurization, but he was responsible for so much more. Men like Pasteur, Edward Jenner, and Robert Koch are among those responsible for the perpetuation of both the germ theory of disease and the theory of immunization-two ideas that have set the foundation for the vast majority of today's medical establishment. With so much resting on the backs of these two outdated theories, it is interesting to note that they are rarely tested under strict scientific scrutiny; instead, they are oftentimes believed to be true without question, making the belief in the medical model more a religion than a science. What's worse, the germ theory of disease as well as the theory of immunization are both outdated, erroneous, and unnecessary in today's world. Both ideas were even questioned and opposed at their inception, but dissention fell on

deaf ears. The truth is quite the opposite from all you have ever learned, and slowly but surely, the truth is making itself known-truths such as the AIDS hoax, the lie of childhood immunization, and most importantly, the myth of contagion.

In case you're wondering, I am not a medical doctor, nor do I insult myself by claiming to be one. My advice comes from years of experience and knowledge, but no claims are made that this advice is based upon so-called clear medical evidence as would be embodied in the writings of a person with a medical degree or license. I do not claim to be an authority on curative medicine, but as you will soon realize, prevention is the key to health; however, there are times when you should visit your doctor. As aforementioned, if you have a medical emergency, you are encouraged to consult a physician.

Many years ago, I was like most people in America: overweight, unhealthy, and completely ignorant of how to live disease-free. I had a grandfather who died of lung cancer, a mother who developed chronic fatigue syndrome and diabetes, a grandmother with emphysema and arthritis, an alcoholic father, and numerous other family members and friends with a variety of health problems. When I would develop cold or flu symptoms, they would last for weeks at a time, and no matter which medicines I took or doctors I visited, my wellness was on a steady decline. I suffered from severe stomach cramps, had canker sores on a regular basis, and it was very rare for me to go a single day without mild aches and pains throughout my body. When I sought the help of doctors, they rarely did anything but medicate, medicate, medicate. Sometimes, I was given prescription medications from relatives who were just too lazy to take me to the doctor. My health waned because of these so-called standard medical procedures. Unfortunately for me, this type of health is what most people consider typical. Most people expect to be in ill health, and they fully believe that whatever their doctor tells them, it has to be true!

What I now consider to be poor health is actually considered normal health by the medical establishment, because with the current medical model being based upon the germ theory of disease, medical practitioners must assume that if only germs cause illnesses, then illnesses can only be cured by

medical means and rarely prevented. This type of thinking has duped our entire mainstream world into adhering to ideas that have put our collective and individual health in jeopardy. We go through life fearing bacteria and viruses-things we cannot see-and we trust the opinions of people we do not know without ever questioning what they have told us to believe. We strictly adhere to the idea that the symptoms of disease mean that there is something wrong with the body, and we are quick to go to the doctor or pharmacist to get medications to relieve our symptoms without ever wondering what caused the symptoms in the first place.

Did you know that over 100,000 people each year die of properly used prescription medications? But because the media, the medical establishment, and most people are under the impression that prescription medications are both good and necessary, we rarely hear of these deaths. Regardless, adverse reactions to prescription medications are high, but instead of hearing about these deaths on the nightly news, we hear about anthrax, the West Nile virus, and other such diseases that take as many as a whopping few dozen lives per year! More people die each year of fluoride poisoning from drinking tap water! More people die each year from routine vaccinations! But we don't hear about these deaths. They aren't sensational enough, not to mention the fact that if we were privy to such information, many medical industries would fail in their attempts to medicate the entire globe. And that's not good for business. You might think you're in good hands with your friendly neighborhood physician, but what you have probably never realized is that the sole purpose of the medical establishment is medicine! It would be called the preventive establishment if its purpose was to prevent disease, but medicine, by its very design, is curative, not preventive. You take medications to relieve symptoms. With the exception of the occasional routine check-up, doctors rarely see patients before they are sick, and what's sad is that when they do, the patients are often sent home with a clean bill of physical health and a mental diagnosis of being a hypochondriac! We have been taught to go to doctors when we're sick. We have been taught that sickness is caused by germs; therefore, prevention doesn't matter.

Health is a product of healthy living, something the medical elite rarely tells anyone. It's not that doctors and other practitioners aren't aware of the keys to healthy living; they are merely tied to the belief that no matter how healthy you are, pathogenic germs such as Ebola, E. Coli, HIV, anthrax, and others can and will cause damage if not treated with drugs and other pharmaceuticals. In fact, nutrition is often overlooked in medical school, usually being offered only as an elective. Medical school students are far more fascinated with how to cure the body than they are with how to prevent disease.

In today's world, disease prevention has actually become synonymous with wiping out disease, and this remains a curative approach. The simple truth is that most medical practitioners have been duped into believing the same mistruths they dupe us into believing, all because the majority of the medical establishment-or medical theocracy-is founded upon a vicious lie known as the germ theory of disease. The belief that disease transmission or contagion actually occurs has practically destroyed our sense of healthy living. Simply put, we are so convinced that sickness is caused by germs in our environment, most of us fail to take the necessary steps to live healthy lives. If germs cause disease, then what's the point? Let's just go ahead and drink, smoke, use drugs, eat foods we shouldn't eat, and-for all intents and purposes-destroy our bodies from the inside out. After all, we're going to die anyway. Right? Right? Maybe not …

For over a hundred years, the world has believed in a medical model that just isn't true. Sadly, this model has caused more illnesses than could ever be blamed on so-called pathogenic germs. Let's take childhood vaccinations for starters. If there was a cornerstone to medical disease prevention, childhood vaccinations would be it. Of course, this is a long way away from true disease prevention, but again, the word "prevention" no longer means what it should. The basic premise behind most childhood immunizations is to pump a tiny amount of pathogenic material into a child's bloodstream in order to trigger an immune response. Supposedly, antibodies are created by the child's immune system, and these antibodies will attack any invading pathogens later in life.

Immunity is said to last a lifetime; however, booster shots are often necessary! That aside, the vaccination theory falls flat on its face when put to the test.

A few years ago, the entire world was shocked to learn about the link between autism and the MMR vaccine. What the news media failed to tell you is that this type of research into the dangers of vaccines is nothing new. Not only has the measles, mumps, and rubella vaccine been linked to behavioral disorders such as autism, but MMR has also been linked to diabetes, lung cancer, epilepsy, and numerous other disorders up to and including death! During the latter part of the 20th century, shaken baby syndrome became a household term when many parents were arrested and charged with the crime of killing their newborn children in violent attempts to get them to stop crying and go back to sleep. It was later determined by competent law enforcement researchers that many of these children died of crib death-also known as sudden infant death syndrome or SIDS-and that their parents were falsely accused. But, to this day, the medical establishment remains puzzled as to the true cause of crib death. At least, that's what we are told by the popular media. Many doctors have actually come forth with shocking evidence that the DPT vaccine-particularly the pertussis portion of this vaccine-was the cause of most crib deaths. It was also determined that the DPT vaccine could create the same physical damages found in victims of shaken baby syndrome. Interestingly, the American Medical Association studied the particulars of SIDS and incorrectly advised parents to change the sleeping positions of their infants. It was argued that suffocation was being caused by babies sleeping on their stomachs, but numerous later studies have failed to duplicate the AMAs faulty survey research. It is quite clear that the culprit here is the DPT shot, which is actually responsible for more than 10,000 deaths per year by the medical establishment's own estimates!

If that weren't enough, vaccines are responsible for an array of diseases and disorders. Both MMR and DPT contain neurotoxins, which can lead to brain damage, nervous system malfunction, and death. They have been linked to anaphylactic shock, arthritis, Alzheimer's disease, and even cancer.

Hold on a second! Vaccines are supposed to prevent disease. Right? Wrong! Vaccines, by their very design, are hazardous to our health. The premise is to create immunity, but if germs don't cause disease, then immunity just doesn't exist! Our bodies can't fight something that isn't there, so instead of creating specialized white blood cells known as antibodies when vaccines are pumped directly into our bloodstreams, our bodies go into defensive mode against the vaccines! If our bodies are too weak to fight off the poisons that have been injected directly into our bloodstreams, thus bypassing our skin-our number one defense-then we can easily become sick due to the toxins found within the vaccines. And what toxins might those be? Well, I'm glad you asked.

The MMR vaccine contains antibiotics and bacterial waste, both of which are harmful to cells. The shot for polio contains formaldehyde, aluminum, mercury, and antibiotics. The toxins in the chicken pox vaccine can lead to fever, aches and pains, and death. DPT can lead to brachial neuritis and various allergic reactions such as death, and DPT also contains aluminum and mercury. Many vaccines are cultured in the cells of chicken embryos, and the rubella strain of the MMR is actually cultured in cells taken from aborted human fetuses! And despite what doctors tell us, we all know the flu vaccine causes symptoms of the flu.

For years, vaccine manufacturers received thousands of complaints of adverse reactions such as death, many of which were taken to court. Quite a few of these lawsuits dealt with mental retardation, sudden infant death syndrome, handicap, and death, and most resulted in the jury ordering the vaccine manufacturers to pay large settlements to the victims and their families. A large portion of the fee paid for routine vaccinations actually went into lawsuit funds to help pay settlements! Many of these lawsuits were even settled out of court in attempts to keep the matters hush-hush. Now, victims of routine immunizations are no longer allowed to sue huge vaccine manufacturers; instead, they must file their claims with government organizations such as the NVICP, which, so far, has paid out over a billion dollars to victims and their families.

Regardless, is any vaccine safe? During the 1930s and 1940s, when the majority of all mass-immunization programs took place in America and throughout the world, the occurrences of many of the diseases vaccinated against did decline, but what is rarely reported is that the decline of most diseases actually began prior to the introduction of their vaccines. Also, in countries like England where vaccinations were not widely used, the same diseases declined due to overall better living conditions, nutrition, sanitation, and hygiene. In countries like Japan and America where mass-immunization programs were embraced, incidents of some diseases actually skyrocketed. The horrific swine flu pandemic of 1920 that killed almost 20 million people worldwide actually coincided with a mass-immunization campaign. A similar campaign was cut short in the 1970s for fear of another pandemic, but no one ever fully placed the blame on the vaccine. Regardless, it is quite obvious that so many deaths were due to the medical establishment's so-called "preventive" measures.

Many diseases that were said to disappear due to vaccinations were actually reclassified and never truly declined. Smallpox was said to be eradicated, but the symptoms for many other childhood illnesses (chicken pox, measles, and mumps to name a few) are almost identical to those of smallpox, which suggests medical reclassification-changing the name of one disease to another in order to say that the one disease was wiped out by a vaccine while another disease arose. Pretty clever, huh? The blunt truth is that no vaccine has ever eradicated any disease. No vaccine is either effective or safe. They are all deadly, putrid poisons that should never be injected directly into our bloodstreams, thus bypassing Nature's best defense against disease: the skin.

What's really troubling is the blatant contradictions the medical establishment is willing to propose as truth, all the while expecting us to whistle a comical tune while believing everything they say. Supposedly, inoculations work on the premise that our bodies will create antibodies to the pathogens found within the vaccines. If we have antibodies, we are immune to the particular disease in question. If we are immune, we can't catch disease. This sounds very neat and tidy on the surface, but what about AIDS? With most other diseases, if you have the antibodies to that disease, you cannot catch the

disease-you are immune to the disease-but with AIDS, if you have the antibodies to HIV, you are said to be HIV-positive and at risk for AIDS! This is also the case with many other viral diseases, such as rabies. Since no one can culture a virus (which is a blatant violation of Koch's postulates, one of the cornerstones of the contagion theory), the only way to detect a virus is to detect its antibodies. But if we have antibodies, we're immune! That's the whole premise of immunization. So, on the one hand, if you have antibodies, you have immunity, but on the other hand, if you have antibodies, you are at risk.

I have never heard so much idiocy in my life. This is just one of those little cracks in the medical model that should make anyone question both the germ theory of disease and the theory of medicine altogether. Medical researchers and practitioners want to have their cake and eat it, too. With so many hands in the proverbial pot, there're too many people who just don't know what's going on and too many people who think they're holier-than-thou and incapable of making mistakes. So, when mistakes are made, the know-nothings remain ignorant, and the holier-than-thous assume that everything's going as planned. All the while, the entire foundation upon which everything in medicine is based continues to crumble underneath their feet. In time, the entire establishment will crumble-the theocracy will fall-and perhaps healthy living will take a stand at the front for a change.

When people are diagnosed HIV-positive (a diagnosis that could happen to anyone due to the faultiness of the HIV test), the fear factor alone is enough to cause disease. Mind over body is a very powerful phenomenon, but I won't get into that right now. Assuming your emotions don't get the best of you if and when you are diagnosed positive for the human immunodeficiency virus (and even if they do), most doctors are going to start you out on a strict daily regimen of AIDS drugs. Often called the "AIDS cocktail," this regimen can consist of taking up to 40 pills per day for the rest of your life. One of the most common AIDS drugs is AZT, which is a very deadly drug in and of itself and is actually capable of creating the same symptoms associated with AIDS! Symptoms such as blood cell destruction, chronic fatigue, lactic acidosis, and even death can all be caused by the prolonged use of AZT.

Initially, AZT was created as a cancer drug, long before anyone had ever heard of AIDS, but due to its high toxicity, it was pulled by its manufacturer and shelved, never to be used again. When AIDS became popular, AZT was put back into production. The media wants us to believe that AZT was specifically designed to combat HIV, thus preventing the onset of full-blown AIDS, but this is a tremendous lie! AZT was created to cure cancer, and because it was so toxic, its use was suppressed. Now, it is used to treat AIDS, but the sad truth of this tale is that AZT actually causes the symptoms associated with AIDS. In numerous clinical studies, AIDS patients who did not take AZT actually lived longer and healthier lives than those who popped these deadly pills like candy. Like all other AIDS drugs, AZT is a notoriously harmful drug that will kill you if taken over a prolonged period of time. It doesn't matter if you're going to develop AIDS or not. If you test HIV-positive and you're put on AZT, you will develop AIDS, and you will die. And remember what I said before: the test for HIV is faulty. Due to how it is tested and the chances of a false positive, almost anyone can test positive for HIV.

If you test positive, will you question the diagnosis and get a second, third, and fourth opinion, or will you blindly follow the medical establishment and take every drug they hand you in hopes that you won't get sick? Of course, HIV doesn't even exist. The belief in viruses came about almost 40 years before the technology existed to see at the submicroscopic level using an electron microscope. Any first-year molecular biology student will tell you that electron microscopes are very poor instruments that produce black-and-white shadows of images on computer-printed electron micrographs that must be interpreted by trained professionals before anyone knows what they are. When you look at an electron micrograph, it's not like looking at a snapshot; it's like looking at black blobs on a white sheet of paper. Unless you're told what you're looking at, you have no idea what you're seeing. News flash: Even the trained professionals were told what to look for at one time, so who's to say they even know what they're seeing?

Back in the 1940s (after over 35 years of believing that viruses must exist), James Hillier manufactured the first useable transmission electron microscope-one that could see at the submicroscopic level. After studying the

poor electron micrographs they produced, scientists finally agreed that they had found a virus. After all, the belief existed for almost 40 years; they would have looked pretty stupid if they didn't find something. But did they really find viruses? Or did they just go on a modern-day witch hunt and accuse the first thing they saw of being a witch … er, I mean, virus?

You've got to know a little something about molecular biology to really understand the argument against the existence of viruses. I'll briefly explain what has happened, but don't worry if you don't fully understand. I doubt there's more than a handful of molecular biologists who fully understand everything they believe. Like I said before, it's more a religion than a science.

Anyway, right now in your body, you have billions upon billions of cells-muscle cells, tissue cells, blood cells, bone cells, and so forth. All of these cells work together to form you. But while you can live many, many years (perhaps a lot longer than you currently believe), your cells only live for weeks or months at a time. After that, they undergo the process of cellular division. One cell splits into two cells, two into four, four into eight, etc. Cells can only divide so many times before they get kind of old, and then they die. Their progeny, of course, can go on forever. But cells do die. The process is known as apoptosis-a kind of cellular suicide.

When this occurs to a cell, the cell dissipates inside the bloodstream and becomes a rather sloppy blob of genetic material and protein debris. Getting back to viruses, the definition for a virus is a genome wrapped in a protein sheath. A genome is nothing more than genetic material, so if a dead cell is genetic material and protein debris, then wouldn't it make sense that these materials could be misidentified on occasion as viruses? A genome wrapped in a protein sheath could easily be a dead cell or a virus.

During the 1940s, scientists did not know that cells died and dissipated in the bloodstream. Instead of finding viruses, they found dead cells, and their witch-hunt concluded with them believing that viruses were nonliving genomes wrapped in protein sheaths. But scientists still believe in viruses. Don't they? Sure they do, because as I have already mentioned, the germ theory of disease is rarely put to the test, and even when it is, any unwanted conclusions are

written off as poor research. The germ theory is, for all intents and purposes, written in stone. It would be blasphemous to go against such a steadfast belief. But science still goes on. The medical establishment has learned about apoptosis-the death of a cell. And what's interesting is that they have admitted on many occasions that dead cells can be misidentified as viruses. The two are so similar until it is difficult to tell them apart! Could it then be possible that a virus is nothing more than a dead cell?

Concerning viruses, there is much more to the story. Viruses are said to invade living cells in order to force reproduction. When living cells eat dead cells (as they do all the time in the bloodstream), it could easily appear as though a virus is entering into a living cell. When living cells eat, it is known as phagocytosis. The process of phagocytosis, then, has been misidentified as a virus entering a cell. Keep in mind that no one sees this process in live action. It must all be interpreted on a series of electron micrographs, which are computer-printed shadows of images on black-and-white paper. It takes experts to read these micrographs, and even the experts have admitted that they have mistaken dead cells for viruses on many occasions. Couldn't they have also mistaken phagocytosis for a virus entering into a living cell? For what it's worth, viruses do not cause disease. They don't even exist. Viral diseases such as smallpox, AIDS, HPS, the flu, and even the common cold are not caused by viruses, and are, therefore, not contagious.

So, what causes smallpox? Smallpox supposedly does not occur anymore, because it was supposedly eradicated many years ago. Regardless, its symptoms are still around. We call these symptoms by other names now, such as chicken pox, German measles, etc. But are these symptoms really indicative of a disease? What you've got to understand is that the body, while complex by design, is very simple in operation. When you take drugs, eat what you shouldn't, drink, smoke, live without regards to health, take routine vaccinations, and stifle your symptoms with medications, your body has no choice but to find a way to get rid of all this toxic stuff you've been pumping into it. So, when it needs to, your body forces a detoxification to eliminate all

of the toxins you have been consuming. What you normally consider disease is actually your body's way of making you healthier!

Children who are constant consumers of dairy products, who are given medications to stifle their cold and flu symptoms, and who are pumped full of toxic vaccinations a dozen times in their infancy are benefited by developing the symptoms of chicken pox, the measles, and other childhood diseases. These diseases are used by their bodies to eliminate a few years' worth of built-up poisons. Such diseases are actually very efficient, because the entire surface of the skin is used to eliminate toxins. As we grow older, the body becomes less efficient, and diseases with pox-like symptoms don't occur very often. Less efficiency is due to storage of too many toxins.

We are taught from a very early age that every time we have a slight cough or an upset stomach, it's okay to take the next best wonder drug to relieve ourselves of these symptoms. Again, the body is very simple in operation. If you put something into it that it cannot use, your body immediately tries to get rid of it. The more you put in, the more your body tries to eliminate, but there are times when these toxins are stored for too long. Usually, normal channels of elimination such as defecation, urination, respiration, and perspiration are enough to eliminate all toxic substances from the body, but when toxins are stored for prolonged periods of time, they must be eliminated through alternate channels, and that is why you develop symptoms such as diarrhea, vomiting, sweating due to high fever, nasal drip, coughing, sneezing, pustules and boils, and so forth.

All of these symptoms are liquid-releasing in nature. They serve the purpose of eliminating poisons that have been stored in your body for a prolonged period of time. Your body uses these alternate channels for the purposes of detoxification, but as we have all been taught, what are you supposed to do when you develop such symptoms? You take medications to relieve yourself of these symptoms. In essence, you stop the detoxification, which forces your body to restore the toxins, thus setting you up for a more harsh detoxification in the future.

The older we get, the more toxins our bodies are forced to store. Doctors have got the whole premise backwards. Liquid-releasing symptoms are not caused by bacteria and viruses. They are not symptoms of a disease. They are symptoms of a detoxification, and the purpose of a detoxification is to take something out of the body that does not belong there. Doctors who prescribe medications that stifle the detoxification are merely stifling the body's natural defense against disease! We need to detoxify. It is a normal part of living, and if we stifle these symptoms, we force our bodies to become inefficient, sluggish, and inoperative. True diseases are caused by the storage of poisons. AIDS, cancer, diabetes, autoimmune disorders such as lupus, lymphocytopenia, lung failure, arthritis, tuberculosis, chronic fatigue syndrome, irritable bowel syndrome, aging, and even death are all caused by the unnecessary storage of toxins in particular areas of your body, thus leading to failure in those parts of your body. The storage of toxins in your pancreas can lead to diabetes; storage in your joints can lead to arthritis; storage in your muscles and bones can lead to fatigue. This information might seem radical and shocking, but it is the simplest explanation to disease symptoms, and in science, the most parsimonious or simplest explanation of the data is always the best explanation.

The medical establishment has become overzealous and complicated in their explanations for disease. They want us to believe that there are thousands of diseases with thousands of causes and thousands of cures. If they would just look at the body rationally, they would realize that it is a simple, elegant machine capable of keeping itself healthy with the proper nutrients, rest, love, and living conditions. Medical practitioners have become cold and impersonal, looking at the human body as nothing more than a pile of blood and guts, never fully understanding why it is alive and never fully understanding what disease is and how to prevent it.

The cold, hard truth is that the only cure for disease is the disease itself! When the body detoxifies, it is in the process of curing or healing itself, and any interference of this process spells disaster. All medications serve to stifle symptoms. All of them are neurotransmitter inhibitors or accelerators capable

of tampering with the proper neurological functioning of the body. Tampering with this function causes malfunction within the body. Cells are forced to operate in ways they wouldn't normally operate, the nervous system is forced to shut down, and the body is changed dramatically. Liquid-releasing symptoms are stifled for purposes of curing the disease, and doctors never realize that these symptoms are the body's way of healing itself. All medications are toxic to cells. All medications, including vaccinations and antibiotics, are toxic to the body and capable of destroying the body from the inside out.

Children who are forced to take Ritalin by so-called caring parents who believe that their children have ADHD are very prone to developing tics, mania, liver failure, allergies, and psychosis. The side-effects of amoxicillin, Cipro, and other antibiotics can include convulsions, psychosis, cellular damage, joint and cartilage deterioration, etc. Psychoactive drugs such as Paxil, Prozac, and Zoloft are responsible for causing more serious bouts of depression, some so severe they have led users to murder their families and kill themselves! Over 100,000 people each year die of prescription medications they were told to take by their doctors, and what's scary, evidence suggests they were taking the drugs the way they were supposed to be taken.

Drugs, whether illegal, prescription, or over-the-counter, are, by their very nature, dangerous to the human body and to the overall health and wellness of anyone who takes them. Drugs are dangerous, and its time we stopped using them to cure diseases that are not harmful to the body. Again, doctors have got it backwards. They want us to believe that the diseases are bad and the drugs are good, but in truth, it is the diseases that are good and necessary, while the drugs only serve to stifle much needed symptoms, thus forcing the body to become more diseased.

So, viruses don't cause disease, drugs are bad, vaccinations kill, and health is a product of healthy living. What about bacteria? Since the 1800s, bacteria have been getting a bad rap from the medical community as being the primary pesky disease-causing germs. But, as I've already said, bacteria don't cause disease. Louis Pasteur acted pretty much by himself on this mistake. He was asked by the French government to find out why drinking fermented

alcohol causes people to get sick. Today, we all know that beer is quite capable of making us experience the symptoms of a detoxification, but back then-back when many people still believed that demons caused diseases and science was still crawling at a rather slow pace-no one knew about detoxifications and how alcohol affects the body. Pasteur dutifully went to work to find out why alcohol makes people sick, and the conclusion he drew was that the bacteria within the beer caused sickness.

After all, when people are sick, bacteria can be found. This conclusion led to the premise of pasteurization, whereby liquids are heated at extreme temperatures to destroy bacteria. All of this is well and good; however, there were quite a few scientists during Pasteur's time who did not agree with Pasteur, but because the French government believed Pasteur, any opposition to his ideas fell on deaf ears. But just because his ideas were believed above all others and without question, Pasteur's conclusions were still incorrect.

Bacteria are very simple, single-celled organisms. Like most of earth's simple creatures, bacteria live for two very basic purposes: food and procreation. They procreate just like any other cell-through cellular division-which makes them asexual. And they are responsible for eating the dead debris left behind when plants and animals die. The word usually associated with the work of bacteria is "decay." When something is dead, it decays, and it is the job of bacteria to break down dead tissue at the cellular level, thereby ridding the earth of dead plants and animals. Without them, we'd be up to our armpits in cadavers. All bacteria are saprophytes. This is what scientists call creatures that eat dead things. Fungi, many insects, vultures, and all strains of bacteria are saprophytes and incapable of eating anything other than dead tissue. If bacteria make us sick, then that means they must be eating our living tissue, thus killing our cells and causing our bodies harm. But as saprophytes, bacteria cannot eat anything but dead tissue. If you are alive, then your tissue is living; therefore, bacteria cannot harm you. Right? Well, not quite …

At all times, you have billions of bacteria living inside of your body. Remember, cells die all of the time. Typically, other cells are responsible for gobbling up these cells and disposing them from the body. But bacteria are also

within your body to help in the expulsion of dead cellular debris. You have bacteria in your throat, lungs, stomach, intestines, and all throughout your bloodstream. They are there to help you digest food, they provide you with certain vitamins, they help in the absorption of minerals, and they perform thousands of other functions that you need for survival. Without bacteria, your body would be overwhelmed by dead cells, and you would die. The symbiotic relationship we have with thousands of strains of bacteria is necessary for our survival, so it is ridiculous for us to think that they can cause disease.

The medical establishment has got the premise backwards. Their assumption is that bacteria devour living cells, thus causing tissue destruction, thus causing disease. But this is the complete opposite of what truly happens. Your body is very efficient, but it needs the proper nutrients in order to function correctly. When you avoid nutritious foods and pump your body full of toxic substances such as beer, prescription medications, and vaccines, your cells do not divide properly, your tissues and organs fail to function, and your body falls into a downward spiral of ill health. Drugs kill cells. Even over-the-counter drugs kill cells.

When you kill cells, the bacteria that are already within your body-bacteria such as staph, TB, strep, and thousands of other strains-are obligated by natural design to devour these dead cells. When you kill cells, bacteria devour these cells, because that's what they do. When you throw out the trash, flies are attracted to the trash. Did the flies cause the trash to exist? Does the presence of flies cause garbage? No! So, does the presence of bacteria cause dead tissue cells? No! The tissue cells must exist first. By taking in toxins, you kill cells, and when you destroy cells, bacteria are attracted to these diseased areas. If you go to the doctor and he finds bacteria, then it is automatically assumed you have a bacterial infection, but the premise is backwards.

Pasteur's critics were never able to convince the mainstream that Pasteur was wrong. The medical establishment-which is most definitely a very lucrative business, spilling over into pharmaceuticals, immunizations, expensive and oftentimes unnecessary surgeries, extravagant hospitals, and so forth-pressed on with the idea of the germ theory of disease without question. Even after

they learned of the toxicity of beer, thus disputing Pasteur's findings, they remained loyal to the germ theory, because it was the foundation of the medical establishment back then just as it is today. Why? Because the only way to cure bacterial and viral diseases is with medications, and medications are huge sellers. For starters, they're legal drugs. Many people use them for recreational purposes when they are not sick, and many doctors see nothing wrong with prescribing drugs for such purposes. Secondly, medications are seen as quick fixes, and offering quick fixes is much more profitable than offering advice on healthy living. Finally, medications are a source of residual income. People who use medications keep coming back for more and more without ever questioning the consequences. We have become comfortable with the idea of popping a pill to relieve ourselves of pain, nausea, aches, and symptoms of so-called germ-related diseases.

The cold, hard truth is that viruses and bacteria do not cause disease. Most diseases are actually body-initiated detoxifications for purposes of regaining balance within the body, and it is when the symptoms of these diseases are stifled that true sicknesses such as AIDS, cancer, and aging occur. The more the body is forced to store toxic substances within its cells, joints, tissues, organs, and bones, the more the health of the body degrades, and this is the true cause of disease. Health is only created by healthy living, and the medical establishment does not offer the necessary tools you need to live healthily.

--http://rawschool.com/disease/

The 1918 Influenza Epidemic Was Vaccine-Caused

Very few people realize that the worst epidemic ever to hit America, the Spanish Influenza of 1918 was the after effect of the massive nation-wide vaccine campaign. The doctors told the people that the disease was caused by germs. Viruses were not known at that time or they would have been blamed. Germs. bacteria and viruses, along with bacilli and a few other invisible organisms are the scapegoats which the doctors like to blame for the things

they do not understand. If the doctor makes a wrong diagnosis and treatment, and kills the patient, he can always blame it on the germs, and say the patient didn't get an early diagnosis and come to him in time.

If we check back in history to that 1918 flu period, we will see that it suddenly struck just after the end of World War I when our soldiers were returning home from overseas. That was the first war in which all the known vaccines were forced on all the servicemen. This mish-mash of poison drugs and putrid protein of which the vaccines were composed, caused such widespread disease and death among the soldiers that it was the common talk of the day, that more of our men were being killed by medical shots than by enemy shots from guns. Thousands were invalided home or to military hospitals, as hopeless wrecks, before they ever saw a day of battle. The death and disease rate among the vaccinated soldiers was four times higher than among the unvaccinated civilians. But this did not stop the vaccine promoters. Vaccine has always been big business, and so it was continued doggedly.

It was a shorter war than the vaccine-makers had planned on, only about a year for us, so the vaccine promoters had a lot of unused, spoiling vaccines left over which they wanted to sell at a good profit. So they did what they usually do, they called a meeting behind closed doors, and plotted the whole sordid program, a nationwide (worldwide) vaccination drive using all their vaccines, and telling the people that the soldiers were coming home with many dread diseases contracted in foreign countries and that it was the patriotic duty of every man, woman and child to get "protected" by rushing down to the vaccination centers and having all the shots.

Most people believe their doctors and government officials and do what they say. The result was, that almost the entire population submitted to the shots without question, and it was only a matter of hours until people began dropping dead in agony, while many others collapsed with a disease of such virulence that no one had ever seen anything like it before. They had all the characteristics of the diseases they had been vaccinated against, the high fever, chills, pain, cramps, diarrhea, etc. of typhoid, and the pneumonia like lung and throat congestion of diphtheria and the vomiting, headache, weakness and

misery of hepatitis from the jungle fever shots, and the outbreak of sores on the skin from the smallpox shots, along with paralysis from all the shots, etc.

The doctors were baffled and claimed they didn't know what caused the strange and deadly disease, and they certainly had no cure. They should have known the underlying cause was the vaccinations because the same thing happened to the soldiers after they had their shots at camp. The typhoid fever shots caused a worse form of the disease which they called paratyphoid. Then they tried to suppress the symptoms of that one with a stronger vaccine which caused a still more serious disease which killed and disabled a great many men. The combination of all the poison vaccines fermenting together in the body, caused such violent reactions that they could not cope with the situation. Disaster ran rampant in the camps. Some of the military hospitals were filled with nothing but paralyzed soldiers, and they were called war casualties, even before they left American soil. I talked to some of the survivors of that vaccine onslaught when they returned home after the war, and they told of the horrors, not of the war itself, and battles, but of the sickness at camp.

The doctors didn't want this massive vaccine disease to reflect on them, so they, agreed among themselves to call it Spanish Influenza. Spain was a faraway place and some of the soldiers had been there, so the idea of calling it Spanish Influenza seemed to be a good way to lay the blame on someone else. The Spanish resented having us name the world scourge on them. They knew the flu didn't originate in their country.

20,000,000 died of that flu epidemic, worldwide, and it seemed to be almost universal or as far away as the vaccinations reached. Greece and a few other countries which did not accept the vaccines were the only ones which were not hit by the flu. Doesn't that prove something?

At home (in the U.S.) the situation was the same; the only ones who escaped the influenza were those who had refused the vaccinations. My family and I were among the few who persisted in refusing the high pressure sales propaganda ,and none of us had the flu not even a sniffle, in spite of the fact that it was all around us, and in the bitter cold of winter. Everyone seemed to have it. The whole town was down sick and dying. The hospitals were closed

because the doctors and nurses were down with the flu. Everything was closed, schools, businesses, post office everything. No one was on the streets. It was like a ghost town. There were no doctors to care for the sick, so my parents went from house to house doing what they could to help the stricken in any way they could.

They spent all day and part of the night for weeks, in the sick rooms, and came home only to eat and sleep. If germs or viruses, bacteria, or any other little organisms were the cause of that disease, they had plenty of opportunity to latch onto my parents and "lay them low" with the disease which had prostrated the world. But germs were not the cause of that or any other disease, so they didn't "catch" it. I have talked to a few other people since that time, who said they escaped the 1918 flu, so I asked if they had the shots, and in every case, they said they had never believed in shots and had never had any of them. Common sense tells us that all those toxic vaccines all mixed up together in people, could not help but cause extreme body-poisoning and poisoning of some kind or another is usually the cause of disease.

Whenever a person coughs or sneezes, most people cringe, thinking that the germs are being spread around in the au and will attack people. There is no need to fear those germs anymore because that is not the way colds are developed. Germs can't live apart from the cells (host) and can't do harm anyway, even if they wanted to. They have no teeth to bite anyone, no poison pouches like snakes, mosquitoes or bees, and do not multiply, except in decomposed substances, so they are helpless to harm. As stated before, their purpose is useful, not destructive.

The 1918 flu was the most devastating disease we ever had, and it brought forth all the medical bag of tricks to quell it, but those added drugs, all of which are poisons, only intensified the over-poisoned condition of the people, so the treatments actually killed more than the vaccines did.

Source:

Vaccination the Silent Killer: A Clear and Present Danger by Ida Honor of and E. McBean (Paperback - 1977) Out of Print–Limited Availability

--https://virus-hoax.com/disease-is-not-caused-by-virus?fbclid=IwAR1VOqF-B-bMVuWUccCyBlOfAxzyOkA1bVTqFhpbYFRoowq3y9WGhqVTRb8

Dr Stefan Lanka: Dismantling the Virus Theory

Scientists must question everything and especially what they love the most, i.e. their own disC 19eries and ideas. This basic rule of scientific research helps avoid erroneous developments and reveals the ones that already exist. Also, we must all be allowed to question the status quo, otherwise we would live in a dictatorship. Moreover, science cannot be limited to a selected number of institutions and experts. Science can and must be conducted by anyone who has the necessary knowledge and the appropriate methods.

Science can be considered science only if its claims are verifiable, reproducible and if they allow predictions. Science also needs external control, because, as we will see, a part of the medical sciences has lost touch with reality for quite some time. Anyone who has knowledge of biology and the genesis of life, of the development and functions of the tissue, of the body and of the brain, will automatically question the assumptions about viruses.

In the reality of the body and of its mechanisms, there is no place for hypothetical malignant processes. All biological processes, including those that can end in suffering, pain and death, are originally meant to be useful.

A different approach to the virus phenomenon is possible and necessary: any layman with some background knowledge reading scientific papers about pathogenic viruses can realize that such viruses do not exist and what is being described are only typical components and characteristics of cells.

--https://virus-hoax.com/disease-is-not-caused-by-virus?fbclid=IwAR1VOqF-B-bMVuWUccCyBlOfAxzyOkA1bVTqFhpbYFRoowq3y9WGhqVTRb8

The Origins of the Idea

The present notion of a virus is based on the ancient ideas that all diseases were caused by poisons (“toxins”) and that people would regain their health by producing “antitoxins” as an “antidote”. Indeed, a few diseases are caused by poisons. The subsequent idea, that the body can restore its health by producing or being given “antidotes”, was born when it was observed that people survived bigger amounts of poison (such as alcohol) when their body was trained by consuming slowly increasing amounts of that poison. However, in reality there are no antidotes, instead the body produces enzymes, which neutralize and eliminate the poisons (alcohol).

In 1858, Rudolf Virchow, the founder of modern medicine, plagiarized the findings of other scientists, suppressed their essential disC 19eries and thus a false view on the cause of diseases was born and imposed as a dogma, which is in fact still in effect to date. According to this dogma, all diseases supposedly originate inside the cells.1 Virchow’s cellular pathology re-introduced into medicine the ancient and refuted the humoral doctrine and claimed that diseases develop from pathogenic poisons (in Latin: virus).

-https://virus-hoax.com/disease-is-not-caused-by-virus?fbclid=IwAR1VOqF-B-bMVuWUccCyBlOfAxzyOkA1bVTqFhpbYFRoowq3y9WGhqVTRb8

Why Everything You Learned About Viruses is Wrong

Groundbreaking research indicates that most of what we believed about the purportedly deadly properties of viruses like influenza is based on nothing more than institutionalized superstition and myth.

Germ theory is an immensely powerful force on this planet, affecting everyday interactions from a handshake, all the way up the ladder to national vaccination agendas and global eradication campaigns.

But what if fundamental research on what exactly these 'pathogens' are, how they infect us, has not yet even been performed? What if much of what is assumed and believed about the danger of microbes, particularly viruses, has

completely been undermined in light of radical new disC 19eries in microbiology?

Some of our readers already know that in my previous writings I discuss why the "germs as our enemies" concept has been decimated by the relatively recent disC 19ery of the microbiome. For in depth background on this topic, read my previous article, "How the Microbiome Destroyed the Ego, Vaccine Policy, and Patriarchy." You can also read Profound Implications of the Virome for Human Health and Autoimmunity, to get a better understanding of how viruses are actually beneficial to health.

In this article I will take a less philosophical approach, and focus on influenza as a more concrete example of the Copernican-level paradigm shift in biomedicine and life sciences we are all presently fully immersed within, even if the medical establishment has yet to acknowledge it.

-https://virus-hoax.com/disease-is-not-caused-by-virus?fbclid=IwAR1VOqF-B-bMVuWUccCyBlOfAxzyOkA1bVTqFhpbYFRoowq3y9WGhqVTRb8

Dr Amanda Vollmer, ND: Germs Do Not Cause Disease

Germs do not cause disease; they are the result of a malfunctioning terrain. You can learn more by reading this book: ***Bechamp Or Pasteur? : A Lost Chapter in The History of Biology***

The immune theory is also incorrect. Expressions are part of growth and part of healing. Some are timely, like before age 2: roseola infantum (not caused by any germ and no vaccine for it so it's hardly promoted) and some illnesses are preparing for growth spurts (ever notice a child goes through a spurt after an illness?)

Your body can express wastes through the skin, glands, lungs, etc., when nutrition is incorrect and/or the organ systems cannot retain and transfer the wastes properly through the liver and kidneys.

Some people, who are processing properly will NOT have their somatids (endemic pleomorphic microorganisms) change format to push the materials out through the skin. So these people will not have symptoms.

Those who are not processing wastes properly will see cellular repair (depending on the TYPE of product of waste, its location and the mechanism employed to remove said wastes) in specific patterns like measles (when vitamin A is low), or mumps (when hormonal material is trapped in the glands) or shingles (when the material is expressing from a nerve) or chicken pox (when the material is water-soluble) on and on. I have had the great fortune to experience these ideas in my clients having these conditions by simply correcting the routes of elimination and increasing the specific nutrition. The results time and time again show correction in the expression rapidly.

Titres etc… are also read incorrectly and studied with the incorrect theory. As well science often changes its tune or finds out after many years that it was wrong all along.

All it means is the body has also been dealing with this cleansing process (either overtly meaning you see symptoms, or C 19ertly, meaning no overt symptoms) and there is still debris being dealt with at that moment in time. Once the offending matter is removed, there will be no more antibodies seen, as the antibodies are part of the removal process.

So when the TERRAIN is strong, the process of elimination of wastes is normal. When the TERRAIN is not functioning properly, other mechanisms for removal of matter are triggered. There can be many complications if these mechanisms are also deficient and wastes become backed up.

Chronic inflammation can be caused by STRESS which leads to symptoms of a COLD, which is the body working to get rid of damaged tissue caused by that inflammation. Microbes are used to do this job. Microbes found at the scene are the RESULTS of disease and not the CAUSE, no more than flies are a cause of garbage.

The contagion theory is also false because as everyone notices, not everyone exposed to something will express in that pattern or at all. This means

there is something else going on. It has nothing to do with being immune or not, this has been sold to us to push the lie of vaccines on us.

When we are babies we experience the world to gain information from it, history from the mother's milk, from the maternal RNA, information from the air, water, soil (babies have a reflex to eat dirt) and this forms the microbial population in the body (not the somatids, which are born of the red blood cell membranes). THIS is what is needed for "immunity", this knowledge of the world around us.

When you leave a child alone (meaning you do not poison them with vaccines, drugs like Tylenol, fungal garbage like antibiotics) and LET him or her experience the world through taste, touch, nursing, breathing, eating dirt, eating bugs, etc., they will get their handful of illnesses of growth and THEN they will NOT EVER GET SICK AGAIN, unless they are malnourished or under chronic physical, emotional or mental stress. I have a child living proof of these facts.

There are memory cells created from this exposure, this learning about the environment in a manner to help the body identify SELF from non-SELF. When NON-SELF gets into the body, the lymphatic system and glands tag that material to be removed by the body, it is not meant to be there, it will engulf it, destroy it, remove it. If the assault comes again and again, then the body will increase the reaction to it, in order to inform the host STOP DOING THAT, or WE CAN'T HANDLE THAT. I see this all the time in people with leaky gut...eventually the body will give them an increasing reaction to the foods they keep eating over and over again... the body saying, no more, we don't want this in the bloodstream and it forces them to stop the behavior.

Contagion ideas are many and varied and something I am still studying and working on. Many of them are simply suggestive, that I can attest to personally. Others are tribal or familial, and some are resonance-based or hormonally signaled. If enough foreign matter of another person's body secretions get into you, the body needs to remove that, so this can explain some of it. But it is not an infection and it is not caused by a germ.

The germs come as a result of illness in order to correct the problem. You need to unlearn what you have been taught and reprogram your thinking which can take some time.

-https://virus-hoax.com/disease-is-not-caused-by-virus?fbclid=IwAR1VOqF-B-bMVuWUccCyBlOfAxzyOkA1bVTqFhpbYFRoowq3y9WGhqVTRb

Viruses as The Exosomotic Detoxification System

Viruses are simply excretions of a toxic cell. Viruses are pieces of RNA or DNA with a few other proteins that bud out from the cell. They are identical to Exosomes, in function, and may actually be considered The Exosomotic Detoxification System in the intercellular environment.

Exosomes are membrane bound extracellular vesicles that are produced in the endosomal compartment of most eukaryotic cells. An endosome is a membrane-bound compartment inside a eukaryotic cell. The multivesicular body is an endosome defined by intraluminal vesicles that bud inward into the endosomal lumen. In biology, a lumen is the inside space of a tubular structure, such as an artery or intestine. Intraluminal vesicles operate within the lumen of a tubular structure. If the multivesicular bodies fuses with the cell surface (the plasma membrane), these intraluminal vesicles are released as exosomes, which have been generically renamed as viruses.

Hence, viruses, which we may refer to as exosomes as a matter of strict Epidemiological pedagogy, are excreted from the cell to assimilate and subsequently clear out intercellular toxins and poisons They are not the cause of any disease, but rather, they function as the “clean-up crew” through their agency as an “absorbent soap or sponge” to prevent disease from happening at the intercellular level.

The Spanish Influenza of 1918

The Spanish Influenza of 1918 was not the result of some external viral threat, but rather, the result of an external insult to the human system in the form of increased radio-based, electromagnetic radiation on the Earth, a well-known fact. It was this increase in electromagnetic radiation that stressed millions of previously compromised immune systems, setting off a cascade of flu systems worldwide. The cause was an overtaxed immune system, and not a virus, in the same way that 5G EMF radiation is causing excessive immuno-related stress to millions of people worldwide, today.

The Invisible Rainbow

The Invisible Rainbow: A History of Electricity and Life, by Arthur Firstenberg, traces the history of electricity from the early eighteenth century to the present, making a compelling case that many environmental problems, as well as the major diseases of industrialized civilization such as heart disease, respiratory illnesses, diabetes, and cancer are related to electrical pollution.

Electromagnetic radiation has been scientifically and empirically linked to a lion's share of health ailments, and the truth about this has been strategically suppressed by major pharmaceutical companies who benefit hugely from constant ailments, while profiting little from healthy lifestyle changes. Cui bono? Who benefits? Pharmaceutical industries, always.

Viruses are NOT Contagious

100 people sit in a room with no masks, one foot from each other, and suddenly one person develops a flu. Did he/she get it from another person there? Who gave it to the person? Can a correlation be shown? Was a virus sneezed from someone's mouth out into the open room, causing the sickness in that unlucky one person? Surprisingly enough, no. Millions of scenarios like this have occurred throughout history, in every country, but no correlation can been shown between any other person in that room and someone getting ill. The control group is the other 99 people. They did not get sick. If a nasty virus was floating in that room, why did the other 99 not get ill? The reason is simple. Every mother knows why. The person who got sick was experiencing some immune deficiency of some sort. A compromised immune system will

make you sick. Viruses only come into play AFTER the immune system is compromised to help eliminate the toxic waste from immuno-distress.

When Would Viral Activity Become Prominent?

As stated, viruses may accompany these processes in small amounts. However, viruses will only become prominent when all these other processes have been largely killed due to:

- Environmental toxicity
- Air Pollution
- Stress
- Molds
- Fungi
- Chemical inundation
- Electromagnetic radiation pollution
- Poor air quality
- Poor water quality
- Poor food quality
- Nutritional deficiencies
- Poor combination or choice of foods
- Toxifying medical treatments, such as antibiotics, vaccines, and pharmaceuticals
- Environmental metal toxicity
- Unhealthy lifestyle, including sexual promiscuity, perversion, and poor hygiene
- Drug use

1) When a body has a high degree of toxicity, bacteria feeding upon that toxic dead matter and tissue will be poisoned to death.
2) When the body is at such a point of systemic toxicity, where bacterial levels and all living microbes in the body have been diminished or killed due to the above reasons, the body will call upon the help of viruses to help cleanse itself.

3) When the body cannot utilize milder methods, such as a cold (usually bacterial), it will utilize the help of non-living protein solvents which are known as viruses. I will show why this is the only logical answer.
4) Viruses help consume and eliminate substances into small particles that can then be expelled via mucous membranes, out through the skin, or through the intestinal tract.
5) Cells produce viruses when their tissues are so toxic that phagocytes, parasites, bacteria, and fungi cannot help cleanse, repair, and regenerate their tissues and fluids.
6) Science states, incorrectly without proof, that viruses originate outside the body, then 'hijack' the RNA or DNA of the cell, and then replicate whilst attacking cells indiscriminately.
7) If this were true, viruses would replicate endlessly, eventually attacking all healthy cells, but they do not.
8) We know that antibodies, a type of white blood cell, regulates the virus.
9) There exists no video evidence of viruses hijacking cells, except for 3D renders, and animations based on theory.

The True Creation of Viruses (simplistic view)

- Science falsely claims that viruses replicate themselves. In reality, it is the cell itself that is producing the virus.
- Notice how viruses are manufactured by a healthy cell but do not destroy it.
- RNA and/or DNA is given by the host cell to dissolve specific substances within the body. If this were not the case, the virus would destroy the cell which created it, but it does not.
- The virus is ejected, damaging part of the cell, but not destroying it completely. The cell is then able to repair itself in time.
- Cells conspire as one unit to cleanse themselves and their surroundings so that new cellular activity can thrive.
- Large amounts of viral activity are present when the body is unable to use milder living microbial detoxification methods to cleanse itself due to systemic toxicity of tissues that poison living microbes.

Steps for Creation of a Virus

1) Viral proteins part of the genome of the living body existing in every cell which determines what type of proteins will be created by a cell is called into action.
2) Viral proteins existing in the cell enter the nucleus of the cell. Viruses are manufactured in their whole form within the cell, and sequenced/encoded via RNA/DNA host directives.
3) The virus leaves the nucleus and is housed in the cell until it leaves the cell.
4) The virus is ejected by the cell, damaging a part of the cell, but not destroying it.
5) Viruses change every 72 hours.
6) Virus replication continues and every 72 hours the first strain is exhausted, and an entirely new set of viruses is then manufactured by cells to continue the job of the previous, until the process is complete.
7) How Viruses are Manufactured | The True Processes of the Virus
8) Viruses do not infect healthy stable cells. They dissolve dead and decaying cells and tissue, dissolving them so that new cellular activity can thrive.

A Good Analogy

Flies appear on dead matter but are not the cause of the dead matter. They are scavengers that break down dead matter. In this way, viruses and bacteria operate in the same exact manner within the body. Without scavengers on Earth to clean up waste, Earth's air would become toxic. The same processes are carried out in the body on a microscopic macro level.

Science states the opposite of what reality dictates to us through our own observation of nature. This is impossible because our bodies are microcosms for the way nature operates outside our bodies. Assuming the opposite of this goes against our observable nature and is foolish.

--https://www.youtube.com/watch?v=VBE_T6iLfFg

Virus Mania

The book Virus Mania by Torsten Engelbrecht and Claus Köhnlein presents a tragic message that will, hopefully, contribute to the re-insertion of ethical values in the conduct of virus research, public health policies, media communications, and activities of the pharmaceutical companies. Obviously, elementary ethical rules have been, to a very dangerous extent, neglected in many of these fields for an alarming number of years.

When American journalist Celia Farber courageously published, in Harper's Magazine (March 2006) the article "Out of control—AIDS and the corruption of medical science," some readers probably attempted to reassure themselves that this "corruption" was an isolated case. This is very far from the truth as documented so well in this book by Engelbrecht and Köhnlein. It is only the tip of the iceberg. Corruption of research is a widespread phenomenon currently found in many major, supposedly contagious health problems, ranging from AIDS to Hepatitis C, Bovine spongiform encephalopathy (BSE or "mad cow disease"), SARS, Avian flu and current vaccination practices (human papillomavirus or HPV vaccination).

In research on all of these six distinct public health concerns scientific research on viruses (or prions in the case of BSE) slipped onto the wrong track following basically the same systematic pathway. This pathway always includes several key steps: inventing the risk of a disastrous epidemic, incriminating an elusive pathogen, ignoring alternative toxic causes, manipulating epidemiology with non-verifiable numbers to maximize the false perception of an imminent catastrophe, and promising salvation with vaccines. This guarantees large financial returns. But how is it possible to achieve all of this? Simply by relying on the most powerful activator of human decision-making process, i.e. FEAR!

We are not witnessing viral epidemics; we are witnessing epidemics of fear. And both the media and the pharmaceutical industry carry most of the responsibility for amplifying fears, fears that happen, incidentally, to always ignite fantastically profitable business. Research hypotheses C 19ering these areas of virus research are practically never scientifically verified with

appropriate controls. Instead, they are established by "consensus." This is then rapidly reshaped into a dogma, efficiently perpetuated in a quasi-religious manner by the media, including ensuring that research funding is restricted to projects supporting the dogma, excluding research into alternative hypotheses. An important tool to keep dissenting voices out of the debate is censorship at various levels ranging from the popular media to scientific publications.

We haven't learnt well from past experiences. There are still many unanswered questions on the causes of the 1918 Spanish flu epidemic, and on the role of viruses in post-WWII polio (DDT neurotoxicity?). These modern epidemics should have opened our minds to more critical analyses. Pasteur and Koch had solidly constructed an understanding of infection applicable to many bacterial, contagious diseases. But this was before the first viruses were actually disC 19ered. Transposing the principles of bacterial infections to viruses was, of course, very tempting but should not have been done without giving parallel attention to the innumerable risk factors in our toxic environment; to the toxicity of many drugs, and to some nutritional deficiencies.

Cancer research had similar problems. The hypothesis that cancer might be caused by viruses was formulated in 1903, more than one century ago. Even today it has never been convincingly demonstrated. Most of the experimental laboratory studies by virus-hunters have been based on the use of inbred mice, inbred implying a totally unnatural genetic background. Were these mice appropriate models for the study of human cancer? (we are far from being inbred!) True, these mice made possible the isolation and purification of "RNA tumor viruses," later renamed "retroviruses" and well characterized by electron microscopy.

But are these viral particles simply associated with the murine tumors, or are they truly the culprit of malignant transformation? Are these particles real exogenous infective particles, or endogenous defective viruses hidden in our chromosomes? The question is still debatable.

What is certain is that viral particles similar to those readily recognized in cancerous and leukemic mice have never been seen nor isolated in human cancers. Of mice and men…However, by the time this became clear, in the late

1960s, viral oncology had achieved a dogmatic, quasi-religious status. If viral particles cannot be seen by electron microscopy in human cancers, the problem was with electron microscopy, not with the dogma of viral oncology! This was the time molecular biology was taking a totally dominant posture in viral research. "Molecular markers" for retroviruses were therefore invented (reverse transcriptase for example) and substituted most conveniently for the absent viral particles, hopefully salvaging the central dogma of viral oncology. This permitted the viral hypothesis to survive for another ten years, until the late 1970s, with the help of increasingly generous support from funding agencies and from pharmaceutical companies. However by 1980 the failure of this line of research was becoming embarrassingly evident, and the closing of some viral oncology laboratories would have been inevitable, except that…

Except what? Virus cancer research would have crashed to a halt except that, in 1981, five cases of severe immune deficiencies were described by a Los Angeles physician, all among homosexual men who were also all sniffing amyl nitrite, were all abusing other drugs, abusing antibiotics, and probably suffering from malnutrition and STDs (sexually transmitted diseases). It would have been logical to hypothesize that these severe cases of immune deficiency had multiple toxic origins. This would have amounted to incrimination of these patients' lifestyle…

Unfortunately, such discrimination was, politically, totally unacceptable. Therefore, another hypothesis had to be found—these patients were suffering from a contagious disease caused by a new…retrovirus! Scientific data in support of this hypothesis was and, amazingly enough, still is totally missing. That did not matter, and instantaneous and passionate interest of cancer virus researchers and institutions erupted immediately. This was salvation for the viral laboratories where AIDS now became, almost overnight, the main focus of research. It generated huge financial support from Big Pharma, more budget for the CDC and NIH, and nobody had to worry about the lifestyle of the patients who became at once the innocent victims of this horrible virus, soon labeled as HIV.

Twenty-five years later, the HIV/AIDS hypothesis has totally failed to achieve three major goals in spite of the huge research funding exclusively directed to projects based on it. No AIDS cure has ever been found; no verifiable epidemiological predictions have ever been made; and no HIV vaccine has ever been successfully prepared. Instead, highly toxic (but not curative) drugs have been most irresponsibly used, with frequent, lethal side effects. Yet not a single HIV particle has ever been observed by electron microscopy in the blood of patients supposedly having a high viral load! So what? All the most important newspapers and magazine have displayed attractive computerized, colorful images of HIV that all originate from laboratory cell cultures, but never from even a single AIDS patient. Despite this stunning omission the HIV/AIDS dogma is still solidly entrenched. Tens of thousands of researchers, and hundreds of major pharmaceutical companies continue to make huge profits based on the HIV hypothesis. And not one single AIDS patient has ever been cured…

Yes, HIV/AIDS is emblematic of the corruption of virus research that is remarkably and tragically documented in this book.

Research programs on Hepatitis C, BSE, SARS, Avian flu and current vaccination policies all developed along the same logic, that of maximizing financial profits. Whenever we try to understand how some highly questionable therapeutic policies have been recommended at the highest levels of public health authorities (WHO, CDC, RKI etc.), we frequently disC 19er either embarrassing conflicts of interests, or the lack of essential control experiments, and always the strict rejection of any open debate with authoritative scientists presenting dissident views of the pathological processes. Manipulations of statistics, falsifications of clinical trials, dodging of drug toxicity tests have all been repeatedly documented. All have been swiftly C 19ered up, and none have been able to, so far, disturb the cynical logic of today's virus research business. The C 19er-up of the neurotoxicity of the mercury containing preservative thimerosal as a highly probable cause of autism among vaccinated children apparently reached the highest levels of the US government… (see article "Deadly Immunity" from Robert F. Kennedy Jr. in chapter 8)

Virus Mania is a social disease of our highly developed society. To cure it will require conquering fear, fear being the deadliest contagious virus, most efficiently transmitted by the media.

Errare humanum est sed diabolicum preservare… (to err is human, but to preserve an error is diabolic).

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3. Member of the Sloan Kettering Institute for Cancer Research, New York (1956 - 1981)
4. Member of Thabo Mbeki's IDS Advisory Panel of South Africa
5. President of Rethinking AIDS (www.rethinkaids.net)

--http://whale.to/a/virus_mania1.html

Dismantling the HIV AIDS Virus Theory

1. **The "HIV Virus" and other so-called viruses are used as examples.**
2. **Why should we doubt the existence of the HIV virus?**
3. **What are viruses? How are viruses being scientifically demonstrated to exist?**
4. **Do We Know the True Cause of HIV/AIDS?**

Do YOU Believe in the Viral Theory? - Part 1

The first isolation of a virus was achieved in 1892 by Russian bacteria hunter Dimitri Iwanowski, who gathered fluid from diseased tobacco plants. He passed this liquid through a filter fine enough to retain bacteria; yet to Iwanowski's surprise, the bacteria-free filtrate easily made healthy plants sick. In 1898 a Dutch botanist, Martinus Willem Beijerinck, repeating the experiment, also recognized that there was an invisible cause and named the infectious agent "tobacco mosaic virus." In the same year as Beijerinck's report, two German scientists purified a liquid containing filterable viruses that caused foot-and-mouth disease in cattle (viruses were at one time called "filterable viruses," but eventually the term "filterable" came to apply only to viruses, and was dropped). Walter Reed followed in 1901 with a filtrate responsible for yellow fever, and soon dozens of other disease-causing viruses were found.

In 1935 another American, Wendell M. Stanley, went back to the beginning and created pure crystals of tobacco mosaic virus from a filtered liquid solution. He affirmed that these crystals could easily infect plants, and concluded that a virus was not a living organism, since it could be crystallized like salt and yet remained infectious. Subsequently, bacteriologists all over the world began filtering for viruses, and a new area of biology was born-virology.

Historically, medical science has vacillated on the question of whether a virus is alive. Originally it was described as nonliving, but is currently said to be an extremely complex molecule or an extremely simple microorganism, and is usually referred to as a parasite having a cycle of life. (The term "killed" is applied to certain viral vaccines, thus implying an official conviction that viruses live.) Commonly composed of either DNA or RNA cores with protein C 19erings, and having no inherent reproductive ability, viruses depend upon the host for replication. They must utilize the nucleic acids of living cells they infect to reproduce their proteins (i.e., trick the host into producing them), which are then assembled into new viruses like cars on an assembly line. Theoretically, this is their only means of surviving and infecting new cells or hosts.

The Replicating Virus Theory

Then it was disC 19ered that, when bacteria slowly begin to die, bacteria create tiny, apparently lifeless forms of survival, the so-called spores. It was then suspected that these spores were toxic and that they were the so-called pathogenic poisons. This was then refuted, since the spores are rapidly developing into bacteria when their vital resources are being restored. When scientists in the laboratory observed that the weak, highly inbred bacteria perished very quickly while turning into much smaller structures than the spores, it was first believed that the bacteria were being killed by the alleged pathogenic poisons, called viruses, and that the viruses were thereby replicating.

The Invention of Bacterial Viruses

Due to the belief that these - at the time of their disC 19ery still invisible- structures were killing the bacteria, they were called phages/bacteriophages, "eaters of bacteria". Only later it was determined that merely highly inbred and therefore almost non-viable bacteria can be made to turn into phages, or bacteria which are being destroyed so fast that they do not have time to form spores. The introduction of the electron microscopy led to the disC 19ery of the structures resulting from the biological transformation or pleomorphism of bacteria when these were suddenly dying or when the metabolism of the highly inbred germs was overwhelmed by processes triggered by the adding of "phages". It was also disC 19ered that there are hundreds of types of different-looking "phages". The disC 19ery of phages, the so-called bacterial "viruses", reinforced the wrong assumption and the belief that there were human and animal viruses that looked the same and had the same structure. This is not and cannot be the case, for several different reasons.

After introducing chemical examination techniques in biology, it was disC 19ered that there are thousands of types of phages and that phages of one type always have the same structure. They consist of a particular molecule, made of nucleic acid, which is C 19ered in a shell of proteins of a given number and composition. It was only later disC 19ered that merely the bacteria which had been highly inbred in the test tube could turn into phages themselves, by contact with phages, but this never applied to natural bacteria or bacteria which had just been isolated from their natural environment. In this process, it was

disC 19ered that these "bacterial viruses" actually serve to provide other bacteria with important molecules and proteins, and that the bacteria themselves emerged from such structures.

Before it could be established that the "bacterial viruses" cannot kill natural bacteria, but they are instead helping them to live and that bacteria themselves emerge from such structures, these "phages" were already used as models for the alleged human and animal viruses. It was assumed that the human and animal viruses looked like the "phages", were allegedly killing cells and thereby causing diseases, while at the same time producing new disease poisons and in this way transmitting the diseases. To date, many new or apparently new diseases have been attributed to viruses if their origin is unknown or not acknowledged. This reflex found an apparent confirmation in the disC 19ery of the "bacterial viruses".

It is important to note that the theories of fight and infection were accepted and highly praised by a majority of the specialists only if and when the countries or regions where they lived were also suffering from war and adversity. In times of peace, other concepts dominated the world of science.[1] It is very important to note that the theory of infection – starting from Germany – has only been globalized through the third Reich, when the Jewish researchers, most of which had opposed and refuted the politically exploited theories of infection, were removed from their positions.[2]

The Detection of Phages and Biological Transformation

The existence of phages can be proved rapidly.

First step: their presence is confirmed through an effect, namely the transformation of bacteria into phages, and also through an electron micrograph of those phages. The control experiments show that phages do not appear if bacteria do not change or if bacteria randomly start decomposing due to extrinsic sudden annihilation, without forming phages.

Second step: the liquid containing the phages is concentrated and applied on another liquid, which has a high concentration at the bottom of the test tube and a low concentration at the top of the test tube. The test tube with the

phages is then powerfully spun (centrifuged) and all the particles gather according to their mass and weight to the place of their own density. The density is the ratio of weight (mass) per unit of volume, expressed as Kg/l or g/mg, respectively. That is why this concentration and purification step for particles with the same density is called density gradient centrifugation.

The layer where many particles of the same density gather becomes "cloudy", which is called a "band." This step is being documented, then the particles concentrated, purified and sedimented in a "band" are removed with a syringe needle. The extracted concentrated amount of particles is called an isolate. A fast and simple electron micrograph will confirm the presence of phages in the isolate, which at the same time is an indication for the purity of the isolate, if the micrograph shows no other particles but the phages. The appearance and the diameter of the phages will also be established with the help of this micrograph. The control experiment performed for this step consists in treating and centrifuging the liquid from bacteria which did not form any phages, where no phages appear at the end of the procedure.

After the step of successfully isolating the phages, the decisive biochemical characterization of the phages follows. The biochemical characterization of their composition is essential for identifying the specific type of phage, since different types of phages often appear to be similar. The isolate obtained through the density gradient centrifugation is now divided in two parts. One part is used to determine the size, type and composition of the nucleic acid; in a separate procedure, the other part is used to determine the amount, size and morphology of the proteins of the phages. Since the 1970s, these tests have been simple standard techniques that are learned by every biology student in their first semesters.

These tests represent the biochemical characterization of the phages. In almost every case, these results have been and are being published in only one publication, since a phage has a very simple structure which is very easy to analyze. The control experiments for these tests use liquid from bacteria which do not form phages and thus cannot present any biochemical proof. The

existence of approximately two thousand different types of phages have been scientifically demonstrated this way

The So-Called Pathogenic Viruses

The "bacteriophages," correctly defined as incomplete mini spores and building blocks of the bacteria, have been scientifically isolated, while the so-called pathogenic viruses have never been observed in humans or animals or in their body fluids and have never been isolated and subsequently biochemically analyzed. To date, none of the researchers involved in virology research seems to have realized this very important point.

The use of electron microscopy and the biochemistry were very slowly returning to normal after 1945 and no one had realized that not one pathogenic virus had ever been isolated in humans or animals; thus, as of 1949 researchers started applying the same idea used for the (bacterio) phages, in order to replicate the human and animal "viruses." John Franklin Enders, born in 1897 in the family of a rich financier, was active in various fraternities after having finished his studies, then he worked as a real estate agent and studied foreign languages for four years before turning to bacterial virology, which fascinated him. He then simply transferred the ideas and concepts that he learned in this area of research to the supposed pathogenic viruses in humans.

Unscientific Experiments and Interpretations Gave Birth to Virology

With his unscientific experiments and interpretations that he had never confirmed through negative controls, Enders brought the entire "viral" infectious medicine to a dead end. It is important to note at this point that Enders, like many infectious diseases specialists, worked for the U.S. military, which had always been and remains to date a huge victim of the fear of contagions. It was mainly the U.S. military which spread its erroneous belief that besides chemical weapons there were also biological weapons in the form of bacteria and viruses. In 1949, Enders announced that he had managed to cultivate and grow the alleged polio virus in vitro on various tissues. The American expert opinion believed everything immediately. What Enders did was to add fluids from patients with poliomyelitis to tissue cultures which he

claimed to have had sterilized, then he alleged that the cells were dying because of the virus, that the virus was replicating in this way and that a vaccine could be harvested from the respective culture.

At that time, summer polio epidemics (polio = flaccid paralysis) were very frequent during summer and they were believed to be caused by the polio virus. A vaccine was to help eradicate the alleged virus. After the polio vaccine was introduced, the symptoms were then re-diagnosed among other things as multiple sclerosis, flaccid acute paralysis, aseptic meningitis etc. and later polio was claimed to have been eradicated. During his experiments, Enders et al. sterilized the tissue cultures in order to exclude the possibility of bacteria killing the cells. What he didn't take into consideration was that the sterilization and the treatment of the cell culture when preparing it for the alleged infection was exactly what was destroying and killing the cells. Instead, he interpreted the cytopathic effects as the existence and the action of a so-called polio virus, without ever having isolated a single virus and describing its biochemistry. The necessary negative control experiments, which would have shown that the sterilization and the treatment of the cells prior to the "infection" in the test tube was killing the cells, have never been performed. However, for this "performance" Enders received the Nobel prize in 1954.

The Invention of the Polio Virus and 'YES" the Measles Virus Too!

1954 is also the year in which Enders applied and introduced the same technique in order to allegedly replicate the measles virus. As he had been awarded the Nobel prize for the alleged polio virus the same year, all researchers believed his technique to be scientifically valid. Thus, to date, the entire concept of polio and measles has been based upon this unscientific technique and fraud. Thus, the polio and measles vaccines do not contain viruses, but particles of dead monkey kidney tissue or human cancerous body cells. To date, no negative control experiments have been done with respect to the so-called polio and measles viruses either, which would have shown that it was the laboratory procedures that lead to the cytopathic effects on the cells. Additionally, all claims and experiments made by Enders et al. and subsequent researchers lead to the only objective conclusion, that in fact they were

observing and analyzing the cellular particles or fragments and the activity thereof in the test tube, misinterpreting these as particles and characteristics of the alleged polio and/or measles viruses.

ALL Viruses from HIV, EBV, CMV, Hepatitis C, West Nile Virus, Ebola, Zika Virus, etc. are ALL Phantom Viruses: Their Existence Has NEVER Been Scientifically Demonstrated!

The following explanations applies to all the so-called (human or animal) "pathogenic viruses". The six papers provided by Dr. Bardens in the course of the "measles trial" as proof for the existence of the measles virus described in a didactically ideal way the various steps of the chain of misinterpretations up to the belief in the existence of a measles virus.

The first paper was published in 1954 by Enders et al.: "Propagation in tissue cultures of cytopathogenic agents from patients with measles" (Proc Soc Exp Biol Med. 1954 Jun; 86 (2): 277–286). This publication can be found on the internet, like all the other publications presented at the measles trial. In that experiment, Enders et al. cut down dramatically on the nutrient solution and added cell-destroying antibiotics to the cell culture before introducing the allegedly infected fluid. The subsequent dying of the cells was then misinterpreted as presence and also isolation of the measles virus.

No control experiments were performed to exclude the possibility that it was the deprivation of nutrients as well as the antibiotics which led to the cytopathic effects. Enders' and his colleagues' blindness can be explained by the fact that he truly wanted to help people, while the 'virus hysteria' was intensifying after the war and during the cold war. It can also be explained by the fact that Enders and many of his colleagues had no idea about medicine or biochemistry and they were competing with the Soviet Union for the development of the first measles vaccine. Such a pressure for success can also explain why Enders and his colleagues ignored their own reservations and cautions expressed in 1954, when they had observed and noted that many cells also died after being treated normally (i.e. without being "infected"), which they thought to have been caused by unknown viruses and other factors. All these facts and cautions were subsequently disregarded. The second paper presented

by the claimant in the 'measles trial' was published in 1959[3] and, for the reasons presented above, the authors concluded that the technique introduced by Enders was not appropriate for the isolation of ANY virus. This rebuttal is not only NOT being discussed by ALL the other researchers, but it is being ignored completely!

The 'Viral Dogma' of Pathogenic Viruses is Still Being Promoted Today!

In a third paper[4], the authors photographed typical cellular particles inside the cells and misinterpreted these as measles virus. They did not isolate any virus. For unexplained reasons, they failed to determine and describe the biochemical structure of what they were presenting as a virus in a separate experiment. In the short description of the methods used, one can read that the authors did not apply the standard isolation technique for viruses, i.e. the density gradient centrifugation. They simply centrifuged fragments of dead cells at the bottom of a test tube and then, without describing their biochemical structure, they misinterpreted the cellular debris as viruses. From the way the experiments were performed, one can only conclude that cellular particles were misinterpreted as viruses.

We find the same situation in the fourth[5] and the sixth[6] publication put forward by the claimant as proof of the existence of a measles virus. The fifth publication[7] is a review describing the consensus process as to which nucleic acid molecules from the dead cells would represent the so-called genome of the polio or measles virus. The result is that dozens of research teams work with short pieces of cell-specific molecules, after which -following a given model – they put all the pieces together on paper. However, this jigsaw puzzle made of so many pieces was never scientifically proven to exist as a whole and was never isolated from a virus, for a polio, measles, HIV or Hepatitis C, Ebola or Zika viruses have never been seen, neither in humans nor in a test tube.

Referring to this publication, the court-appointed expert stated that it described the gold standard, i.e. the entire virus genome. It is obvious that the expert did not read this paper, whose authors stated that the exact molecular composition and functions of the measles virus genome will have to be the

object of further research, which is why they had to rely on other virus models in order to achieve a consensus on the structure and functions of ANY virus genome. The easiest thing for anyone to notice is that in all of these publications, as well as in all other publications on the "measles virus" and other pathogenic viruses, including HIV, EBV, CMV, Ebola and Zika, no control experiments have ever been performed. No researchers used the density gradient centrifugation technique; instead, they only centrifuged cellular debris at the bottom of a test tube.

This technique, used to collect all the particles from a fluid, is called pelletizing. From a logical and scientific perspective, it can be said that in all publications on the so-called "pathogenic viruses", the researchers demonstrated in fact only particles and characteristics of cells. I would also like to point out that the so-called giant viruses[8] , i.e. an enwrapped nucleic acid can be found everywhere in the sea and in basic organisms. Like all bacterial phages, not only are they harmless, but they have beneficial functions. They can be also isolated by using the density gradient centrifugation, which proves their existence (see the graphic above).

I also recommend Prof. Lüdtke's relevant review (1999).[9] He noted that at the early beginnings of virology, the majority of virologists always concluded that the structures they had mistaken for viruses turned out to be components of the cells and thus, they were only the result of the experiment and not the cause of the changes observed. After the disC 19ery and characterization of the phages and after introducing the dogma that the nucleic acid was the genome of all cells and viruses, the consensus was born, according to which such viruses must exist in humans and animals as well. In 1992, the dogma stating that the nucleic acid is the genotype of all cells was retracted in the scientific community. The 'viral dogma' of pathogenic viruses, however, is still being promoted today to the harm of billions of people. - for what?

The Bottom Line Concerning Phantom Viruses

My bottom line still holds the truth that the terrain or internal environment is everything and the germ or so-called virus is NOTHING! The germ or so-called virus can only be a symptom of cellular breakdown due to an

imbalance of the delicate alkaline pH balance of the body fluids and NOT the cause of that breakdown. That is why years ago I offered any scientist in the World a finder's fee of 5 million US dollars if they could prove the existence of the HIV virus using Koch's postulates. It has now been over 20 years and I am still waiting even though currently I no longer have the funds to pay the prize due to political assassination! It is unfortunate that a former 5 million US dollar prize offered 20 years ago was not enough money to change the current medical viral dogma that is currently paying out trillions of dollars to guess who?

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Second Thoughts about Viruses, Vaccines, and the HIV/AIDS Hypothesis

Viruses

“In the sciences, people quickly come to regard as their own personal property that which they have learned and had passed on to them at the universities and academies. If however, someone else now comes along with

new ideas that contradict the Credo (that has been recited for years and passed on in turn to others) and in fact even threaten to overturn it, then all passions are raised against this threat and no method is left untried to suppress it. People resist it in every way possible: pretending not to have heard about it; speaking disparagingly of it, as if it were not even worth the effort of looking into the matter. And so a new truth can have a long wait before finally being accepted."-Goethe

Introduction

The first isolation of a virus was achieved in 1892 by Russian bacteria hunter Dimitri Iwanowski, who gathered fluid from diseased tobacco plants. He passed this liquid through a filter fine enough to retain bacteria; yet to Iwanowski's surprise, the bacteria-free filtrate easily made healthy plants sick. In 1898 a Dutch botanist, Martinus Willem Beijerinck, repeating the experiment, also recognized that there was an invisible cause and named the infectious agent "tobacco mosaic virus." In the same year as Beijerinck's report, two German scientists purified a liquid containing filterable viruses that caused foot-and-mouth disease in cattle (viruses were at one time called "filterable viruses," but eventually the term "filterable" came to apply only to viruses, and was dropped). Walter Reed followed in 1901 with a filtrate responsible for yellow fever, and soon dozens of other disease-causing viruses were found.

In 1935 another American, Wendell M. Stanley, went back to the beginning and created pure crystals of tobacco mosaic virus from a filtered liquid solution. He affirmed that these crystals could easily infect plants and concluded that a virus was not a living organism, since it could be crystallized like salt and yet remain infectious. Subsequently, bacteriologists all over the world began filtering for viruses, and a new area of biology was born virology.

Historically, medical science has vacillated on the question of whether a virus is alive. Originally it was described as nonliving but is currently said to be an extremely complex molecule or an extremely simple microorganism, and is usually referred to as a parasite having a cycle of life. (The term "killed" is applied to certain viral vaccines, thus implying an official conviction that

viruses live.) Commonly composed of either DNA or RNA cores with protein C 19erings, and having no inherent reproductive ability, viruses depend upon the host for replication. They must utilize the nucleic acids of living cells they infect to reproduce their proteins (i.e., trick the host into producing them), which are then assembled into new viruses like cars on an assembly line. Theoretically, this is their only means of surviving and infecting new cells or hosts.

Birth of Virology-a Miscarriage?

Underlying the birth of virology was the doctrine of monomorphism-that all microorganisms (herein called microforms) are fixed species, unchangeable; that each pathological type produces (usually) only one specific disease; that microforms never arise endogenously, i.e., have absolute origin within the host; and that blood and tissues are sterile under healthy conditions. This last point warrants immediate comment. Theoretically, under ideal health conditions the blood might be sterile, though it has the inherent potential to develop morbid microforms, as discussed in the main text of this book. Long and repeated observation of live blood in the phase-contrast, dark-field microscope, however, shows that the blood can contain various microforms in an otherwise asymptomatic host, or in a condition defined as normal or healthy in orthodox terms. The forms are easily visible before other physical symptoms arise. (Since long and repeated observation has correlated their presence with other disease symptoms and their disappearance with the return of health, they serve as indicators of impending outward signs of disease.)

Monomorphism was the cornerstone of developments in 20th-century medical research and treatments. Refusal by the mainstream to examine fairly, much less accept, the demonstrated facts of pleomorphism-that viruses and bacteria (and also yeast and fungi) are evolutions from the microzyma; that microforms can rapidly change their form (evolve and "devolve") in vivo, one becoming another dependent upon conditions in the inner terrain (environment); that blood and tissues are not necessarily sterile; and that there are no specific diseases, but only specific disease conditions-was the foundation of a latter day "Galileo debate." It is so called because those who wore the

"robes" of scientific authority, reprising the religious fanatics who punished the noted astronomer for his truths, would not be swayed from folly when presented with its contrary proofs. These proofs began in earnest with Antoine Bechamp in the last century (who also endured the indignation of a fanatical clergy).

In the early third of the 20th century, the heated debate took place over filterable bacteria versus non-filterable. This was a major battle concerning micromorphology (discussed briefly below). The orthodox view prevailed: bacterial forms were not small enough to pass, or did not have a smaller, earlier stage. What passed through "bacteria-proof filters was something else, i.e., viruses. Standard medical textbooks long made this fettering distinction between bacteria and viruses. Subsequently, however, the cellular nature of many filterable forms originally thought to be viruses, such as some mycoplasmas, rickettsias, and various other groups, has been established. In this writer's opinion, with the victory of the monomorphic view, deeper understanding of infectious "disease" was lost, setting the stage for cancer, degenerative symptoms, and AIDS.

What You See?

A typical bacterium is about 1 micron in size. Most filterable forms now called viruses range in size from .3 microns (300 millimicrons) to .01 micron (10 millimicrons)-partially in the colloidal range (.1 to .001 micron). Most of the larger viruses are a third to a quarter the size of the average bacterium. Size is critical because .3 microns is the resolution limit of modern-day light microscopes (except for the claimed resolution of Canadian microscopist Gaston Naessens' Somatoscope, at .015 microns). Thus, as viruses were disC 19ered (except for the very large ones, such as mumps), they required an electron microscope to be seen, especially given the fact that Royal Rife's microscope technology and career were destroyed by vested interests. Unfortunately, electron microscopes and the process of chemical staining disorganize all specimens, whereas Rife's technology allowed life to proceed and thus evolve under its lens. As viruses became visible to advancing

technology, the ramification was that the technology revealed, to minds infected with monomorphism, protein structures deemed foreign to the body.

A New Theory

Formulated by Bechamp in the 19th century, microzymian principle is the basis of a new theory about "viruses." Briefly, this principle holds that in all living organisms are biologically indestructible anatomical elements, which he called microzymas. They are independently living organized ferments, capable of producing enzymes and capable of evolution into more complex microforms, such as bacteria. Bechamp's thesis is that disease is a condition of one's internal environment (terrain); that disease (and its symptoms) are "born of us and in us"; and that disease is not produced by an attack of microentities but calls forth their endogenous evolution. (The common biological basis for this is discussed below.).

My studies and research suggest that the complexes science calls viruses and retroviruses originate in the cell as microzymian principle suggests. However, they are created in response to an alarming situation (condition of disease) for the purpose of genetic repair. They are repair proteins evolved from anatomical elements (microzymas), not pathogenic organisms.

It is known that normal cell activity includes genetic repair. Both enzymes and proteins must be involved. What is the mechanism? Viruses are organized around DNA or RNA, not both. Thus, they are quite probably intended to repair genetic molecules or other structures and show up with disease symptoms because the body needs them. Since viruses require a living cell/host for reproduction, how do we know that the scenario is not set in motion for a purpose by the cell (i.e., its microzymas), rather than being the result of invasion? Because disease (disturbance of balance in the organism) is so prevalent, especially that which has not yet become indicated by common symptoms, repair proteins may be frequently or constantly present. A toxified cell may easily suffer localized damage to the genome. Since most observers are not even aware of microzymian principle, much less understand or even

consider it, and since monomorphism stresses invasion, these protein complexes are regarded as foreign and disease is attributed to them.

Another note of interest is the size of viruses compared to the microzyma. Viruses are considered to be some of the smallest biological particles and are frequently of colloidal size: e.g., hepatitis A, 27 nanometers (.027 microns); hepatitis B (.042 microns); poliovirus (.03 microns); EBV (.042 microns); fflV (.080 to .12 microns), influenza (.08 to .12 microns); mumps (.15 to .30 microns); smallpox (.30 x .24 microns); and, according to Bechamp, the microzyma (.0005 microns). This coincides with what Gaston Naessens says about the size of his somatid, which ranges from "a few Angstroms to a tenth of a micron" [1].

In his book, The Blood and Its Third Anatomical Element, Bechamp states: "The microzyma is at the beginning and at the end of all organization. It is the fundamental anatomical element whereby the cellules, the tissues, the organs, the whole of an organism are constituted living. ... In a state of health the microzymas act harmoniously and our life is, in every meaning of the word, a regular fermentation. In the condition of disease, the microzymas do not act harmoniously, the fermentation is disturbed, the microzymas have either changed their function or are placed in an abnormal situation by some modification of the medium"[2]. The virus is either a self-ordered microzymian polymerization, or (less likely) a structure made by microzymas. It is enveloped in protein, which is also composed of microzymas, and could well be thought of as an autonomous molecular tool box.

Along with Drs. Glen Dettman and Archie Kalokerinos, I wonder, "whether Bechamp's writing anticipated, in some respects, the disC 19ery of RNA and DNA?" Could the genetic structure be the construct, thus a tool, of the microzyma? They quote a personal communication (1974) from a Professor Bayev of the USSR Academy of Sciences, who discusses his work showing that molecular self-restoration from its parts of pure transfer RNA from brewer's yeast is possible [3].

In my own research I have found molecular restorations similar to that described by Bayev. In my experiment I used five-year-old coagulated capillary

blood from a woman with cancer. With one drop of 0.9% of sodium chloride, the blood was restored to an appearance and level of activity characteristic of a freshly drawn sample. In other words, the anatomical microzymas of the dried blood were restored to activity. Even the white globules became active. One might eagerly ask for an explanation of the reversal of polymers made during clotting. It is unclear at this point how this reversal takes place, except to say that what can evolve apparently has the potential to devolve. It is observable, however. For example, I have seen, and recorded on video, rod microforms retrograding without any visible decomposition from 10 microns in length to the vicinity of .1 micron.

This research supports the very important postulate that the cell is not the smallest living biological unit, as promulgated by conventional medical science. In fact, a smaller biological unit is the imperishable microzyma, which is an organized, living being "of a special category without analogue," said Bechamp, who found them ready to become active in chalk deposits at least 11 million years old [4].

The Pleomorphic Cycle

I suggest a developmental cycle in vivo consisting of three macrostages: (1) a primitive stage comprising the repair protein complexes; (2) an intermediate, or bacterial, stage including filterable forms such as the cell-wall deficient forms described by Lida Mattman, Ph.D. (in Cell Wall Deficient Forms, Stealth Pathogens); and (3) a culmination stage consisting of yeast and fungal phases, and then mold, the end phase. The usual course of development would be from microzyma to repair protein and then to bacterium, etc. However, under certain conditions, such as trauma for example, it is highly likely that the microzymas can skip the primitive stage and become bacteria directly. Although these transformations are as astounding as that of a larva to a butterfly, what is equally impressive under observation is the rapidity with which they can take place-in minutes, even seconds, and sometimes. By the same token, when provoked by conditions and the cycle proceeds to yeast, fungus and then mold, it may occur so rapidly that the bacterial stage, if it happens, has no time to be of any significance.

Thus, symptogenic microforms can originate within higher organisms without invasion, via a permutation of the endogenous microzymas when the situation calls for such change. The situation is an imbalance referred to by Bechamp as a "modification of the medium." Endogenous evolution is evident under the microscope when bacterial, yeast, and fungal forms are seen coming out of red blood cells which initially appear normal.

Biological Basis for the Pleomorphic Cycle

There is a common biological basis for the pleomorphic cycle and its increasing complexity of organization: More complex forms evolve inherently upon the death of an organism for the purpose of recycling its anatomical and chemical structures in the carbon cycle. The process of rapid evolution (which is reversible) is an essential life process which, beyond the repair stage, is necessary to return a dead organism to the earth. The second and third-stage microforms degenerate the body's vital substances and tissues via putrefaction (bacteria) and fermentation (yeast and fungus). Fermentation results in acid waste products, which further break down tissue. Disease symptoms, then, especially the degenerative type, are not produced by viruses, but manifest as chemical decomposition, or attempted recycling via fermentation and acid toxins, but with "host" survival processes still operable. Obviously, certain other factors may play important roles in producing symptoms, such as heavy metal toxicity, or state of mind, for example. Some of the body's survival methods also produce symptoms commonly called diseases. An example is eczema, an emergency expulsion of acid toxins via the skin.

The aforementioned causal (alarming) situation, or modification of the medium, is chronic acidification (pH imbalance) and oxygen deprivation in the blood and tissues due to acid-forming foods, adverse lifestyle, emotional stress, and environmental stress. This is not oversimplification. Acidification/hypoxia biochemically signals a dead host to the microzymas, while creating collapsed areas (dead zones) of the colloidal system in the intercellular fluid, and it is the primary physiological disease condition out of which the symptoms commonly called specific diseases arise.

Thus, we distinguish between this disease condition and its consequent symptoms, which include both the morbidly evolved microzymas and the physiological signs commonly, thought of as specific diseases. As they develop, microforms (bacteria, yeast, fungus and mold) are actually scavenging forms of the microzyma, developed when disease in the cell life requires tissue to be broken up. These upper development forms are the ones easily visible in the blood before physical symptoms arise. They disappear (devolve) when the recycling task is complete, once again becoming microzymas of the earth and/or air.

Virus or Toxin?

Regarding the early period of virus isolation, a question is whether the unseen entities isolated in filtered fluids were accompanied by the waste products (mycotoxins) of fermentation by yeast and fungus of cellular elements, such as DNA. If virus filtrates are injected into a host to prove virulence, it is almost certain that easily filterable molecular toxins will be introduced as well. Could Dr. Stanley's "pure crystals of tobacco mosaic virus" have been crystallized toxins? If so, they would certainly be highly symptogenic, as are exotoxins at the intermediate stage of the cycle, for example. However, it is not proof of anything that you can create illness by poison injection, except proof of that tautological fact.

In my research utilizing dark-field and phase-contrast microscopy, it is common to see crystallizations in the blood. It is normal for the body to use calcium or other mineral salts, and fats as well, to chelate the waste products from the morbid fermentation of body proteins, fats and sugars. Such crystal deposits are found in cancer tissue as well. A malignant tumor removed from the breast of one of my research clients was found to have numerous calcium deposits attached to it. It is an attempt to render inactive the substances that make our inner streams filthy, poison our cells, and coagulate colloidal systems in blood and intercellular fluid.

The term "virus" is the Latin word for poison, and gives us insight into the immediate cause of disease symptoms-poisons: mycotoxins, endotoxins,

exotoxins, and toxins from environmental sources (many of which are primary or secondary mycotoxins). Orthodox medicine is well aware that it is bacterial toxins more than the bacteria themselves (they feed in us), that cause the symptoms referred to as infectious disease. Little if any emphasis is placed on this fine but important distinction. Always, the germ is emphasized. There is little to no awareness (or acknowledgment), either, of the same role played by toxins of the culminate microforms of the pleomorphic cycle. Their action and the body's response to them are frequently ascribed to viruses, which do not produce toxins but are said to wreak havoc by a number of other means. However, if they participate in symptogenesis in a host it is because they are stimulated to evolve into more complex, toxigenic forms. Somewhat less likely is the possibility that they cause damage as a result of erroneous construction or function, for one reason or another-missing mineral nutrients leading to enzyme deficiencies, for example.

Misconception Breeds Contempt

In addition to chemical toxicity, however, what is the impact of the fear (emotional toxicity) that the word "virus" brings to mind and heart? It has been said that fear is the deadliest of disease conditions. If a "disease" kills one person, the fear of it may kill twenty. General prejudice concerning the danger of viruses is fundamental biological error based on Louis Pasteur's germ theory and is itself a perpetrator of auto-suggested illness. For example, in Africa doctors attribute some AIDS sickness to "voodoo death" syndrome, the term for illnesses induced psychologically. According to one nurse, "We had people who were symptomatically AIDS patients. They were dying of AIDS, but when they were tested and found out they were negative they suddenly rebounded and are now perfectly healthy" [5]. Ironically, if the germ theory were founded on facts it would be correct to fear viruses, except there would be few, if any, humans living to discuss the issues. These so-called pathogenic entities are to researchers, medical practitioners and the press what criminals are to detectives-the focus and justification of their existence.

The Encyclopedia Britannica has this to say about bacteria, which relates also to viruses:

The common idea of bacteria in the minds of most people is that of a hidden and sinister scourge lying in wait for mankind. This popular conception is born of the fact that attention was first focused upon bacteria through the disC 19ery, some 70 years ago, of the relationship of bacteria to disease in man, and that in its infancy the study of bacteriology was a branch of medical science. Relatively few people assign to bacteria the important position in the world of living things that they rightly occupy, for it is only a few of the bacteria known today that have developed in such a way that they can live in the human body, and for every one of this kind, there are scores of others which are perfectly harmless and far from being regarded as the enemies of mankind, must be numbered among his best friends.

It is in fact no exaggeration to say that upon the activities of bacteria the very existence of man depends; indeed, without bacteria there could be no other living thing in the world; for every animal and plant owes its existence to the fertility of the soil, and this in turn depends upon the activity of the micro-organisms which inhabit the soil in almost inconceivable numbers. It is one of the main objects of this article to show how true is this statement; there will be found in it only passing reference to the organisms which produce disease in man and animals- for information on these see Pathology and Immunity.

The general message of the foregoing article applies even more aptly to viruses in the sense that much fear has been bred and cultivated around them, although they never produce disease symptoms, whereas some bacteria do. The writer of the above understands bacteria, with the exceptions that symptogenic bacteria found in man and animals do not produce disease (only secondary symptoms), that their precursors are endogenous to higher organisms, and they have not "developed in such a way that they can live in the human body." If anything, the reverse is true. According to one theory of microbiology, microforms have colonized over eons to become higher organisms. In one

sense, then, the human body has developed as a specialized environment for them.

An important dimension of the bacterial dependence of higher life forms is the floral population in the human digestive tract. Literally, these "foreign species" keep us alive.

Most bacteria have the same underlying function, whether found in soil, sewage, in the human digestive tract, or elsewhere in nature: they are an essential part of the life processes of higher organisms. They will not or cannot attack healthy cells or tissues, but certain ones will recycle sick or dead tissue in much the same way insect pests are drawn to weaker plants. As Bechamp said, "Nothing is the prey of death; all things are the prey of life."

Following in the wake of misconceptions arising from the fundamental biological error known as the germ theory of disease, defining the filtrates of diseased tissue as a newly disC 19ered infectious microform was the birth of a major corollary error in bioscience.

Viral Behavior Reconsidered

Listed below are ways viruses are said to disrupt or destroy host cells according to orthodox medical science and the germ theory. Following each in italics is a different interpretation following from microzymian principle:

Viral proteins insert into the host cell's plasma membrane and directly damage its integrity to promote cell fusion (HIV, measles, and herpes viruses).

Proteins are attempting to repair membrane damage or enter cells to make other repairs. There is the question as to whether viruses on cell walls are coming or going. In both cases it would be a matter of whether or not a cell has been disturbed by excess fermentation and acidity. But in the former case the cell would be dysfunctional before attachment occurs, thus requiring the repair complex. Another possibility, perhaps remote, is that dysfunctional receptors on cells are in need of repair, or they are C 19ered by these complexes to inactivate malfunctioning cells. Positive electrical charges in a

compromised terrain, primarily on acid molecules from fermentations, discharge cell membranes and act as mortar to stick cells together.

Viruses inhibit host cell DNA, RNA, or protein synthesis. For example, poliovirus inactivates cap-binding protein, which is essential for protein synthesis directed by capped host cell mRNAs, while allowing protein synthesis from uncapped poliovirus RNAs.

Protein inactivation is probably being done by fermentation or by acidic toxins from fermentation, while "poliovirus" is produced in the cell to reverse the damage.

Viruses replicate efficiently and lyse host cells, e.g., liver cells by yellow fever, and neurons by polio virus.

Highly unlikely. The lysing is more likely caused by acid mycotoxicosis, or by free radicals (ROTS) released in response to ***Mycotoxic** stress, or from other sources (ionizing radiation, for example). Repair particles are residual after cell wall disruption.

***A mycotoxin is a toxic secondary metabolite produced by organisms of the fungus kingdom and is capable of causing disease and death in both humans and other animals. The term 'mycotoxin' is usually reserved for the toxic chemical products produced by fungi that readily colonize crops. --Wikipedia**

Slow-virus infections (e.g. sub-acute sclerosing panencephalitis, caused by the measles virus) culminate in severe progressive diseases after a long latency period.

How is this demonstrated? Perhaps "latency" is a period of successful or attempted repair that eventually falters. Symptomology naturally appears in the weakest parts of the body. Excess acidity is always a systemic problem that localizes, just as cancer is a systemic condition that localizes, even though its symptogenic influence may later spread.

Viral antigen proteins on the surface of the host cells are recognized by the immune system, and the host lymphocytes attack the virus-infected cells (e.g., liver cells infected with hepatitis B).

Liver cells are damaged beyond repair by mycotoxicosis, and the immune system, our elaborate janitorial service, is cleaning up the garbage. Perhaps the repair protein antigen is expressed to signal immune response (because the cell is beyond repair), which is one explanation for why there are antibodies to these proteins.

Viruses damage cells involved in host antimicrobial defense, leading to secondary infections.

The function of immune cells is damaged by fungal infestation and/or overwork by toxic overload, preventing proper cleanup and elimination of disharmonious, symptogenic elements.

Viral killing of one cell type causes the death of other cells that depend on them, e.g., degeneration of muscle cells enervated by the attack of poliovirus on motor neurons.

Once again, a misinterpretation and lack of understanding that it is not viral microforms that damage neurons. Toxins from bacteria, yeast, fungus and mold-as well as the fermentation of glucose, proteins, hormones and fats-produce, or influence the body to produce, disease symptoms. Not recognizing the "virus," for what it is, observers attribute disease to it.

Host cell responses to viruses include metabolic derangements and transformations resulting in neoplastic changes.

Metabolic derangement has occurred prior to the appearance of repair proteins, due to toxic overload in the cell. It is more likely that the proteins attempt to prevent cell transformation, and that cancerous development is cell conversion from primarily oxidative to wholly fermentative metabolism, mediated by fungus and mold.

Listed below are further orthodox views regarding virus replication, etc., with alternative interpretations in italics.

According to orthodox theory, viruses enter a host cell and replicate at the host's expense. Replication is accomplished using enzymes which are distinct for each virus family. For example, RNA polymerase is used by

negative-stranded RNA viruses to generate positive-stranded mRNA, whereas reverse transcriptase is used by retroviruses to generate DNA from their RNA template and to integrate that DNA into the host genome.

It is normal for repair proteins to generate enzymes to do their work

One reason suggested for viral tropism (the tendency to infect some cells but not others) is the presence or absence of host cell receptors that allow the virus to attach. It is said, for example, that HIV binds to the protein (CD4) involved with antigen presentation on helper T-lymphocytes, that Epstein-Barr virus binds to the complement receptor (CD2) on macrophages, that rabies virus binds to the acetylcholine receptor on neurons, and that rhinoviruses bind to the adhesion protein (ICAM-1) on mucosal cells.

Theoretically, once attached, the entire virion, or a portion containing the genome and essential polymerases, penetrates into the cell cytoplasm in one of three ways: (1) Translocation of the entire virus across the plasma membrane; (2) receptor-mediated endocytosis of the virus and fusion with endosomal membranes; or (3) fusion of the viral envelope with the cell membrane. Theory suggests that within the cell the virus uncoats, separating its genome from its structural components and losing its infectivity before replication. In either the nucleus or cytoplasm, newly synthesized viral genomes and capsid proteins are assembled into progeny virions, which may then bud through the plasma membrane. Unencapsulated viruses may be released also, directly through the membrane.

It is interesting, however, that viruses can somehow choose the "infection" to be abortive, latent or persistent, meaning respectively: (1) viral infections with incomplete replication cycles; (2) persisting in a cryptic state, like herpes zoster within a dorsal root ganglion, which suddenly becomes active to produce shingles; (3) continuously synthesized virions, with or without altered cell function (e.g. hepatitis B). These three ideas, especially latency, have arisen as feeble excuses for the untenable virus theory.

In order for viruses to reproduce, they must complete the following four steps:

Adsorption and penetration of a cell. The viral particle binds to the host cell membrane. This is usually a specific interaction in which a viral encoded protein on the capsid or a glycoprotein embedded in the virion envelope binds to a host cell membrane receptor and is then internalized. This internalization occurs by endocytosis or by fusion of the virion envelope with the host cell membrane.

This is the mechanism whereby the viral particle enters the cell for the purposes of carrying out repairs to the damaged DNA or RNA.

Uncoating of the virus, so that the nucleic acid can be released from the capsid into the nucleus or cytoplasm.

Repair work may require uncoating. An uncoated "virus" in the cytoplasm may have come from the nucleus and not yet have a coat, as in the case of hepatitis B according to med science. A coat is then created to protect the nucleic acid, to make a communicative or responsive protein complex, or to allow exiting the cell for remote function or for neutralization and recycling by the immune system.

Synthesis and assembly of viral products as well as inhibition of the host cell's own DNA, RNA and protein synthesis.

Protein complexes produced in response to an alarming situation-fermentative and mycotoxic stress-are capable of self-ordered replication. As suggested by Bechamp, the microzyma is specific for each organ, therefore specific repair proteins will be needed for specific cells that make up specific organs that are being disturbed. There is the question of why the great numbers in some cases. One possibility is simply overreaction; for example, fever can be extreme.

And finally, release of virions from the host cell either by budding or lysis.

Complexes leave the cell for remote function or to be neutralized.

Repairs have failed, and complexes are released prior to or during the breakdown of the cell by acid toxins or the immune system.

Further Considerations

Virologists refer to certain microforms as passenger viruses, which are present in asymptomatic situations, riding on their host's genetic molecule like a passenger. To the conventional mind searching for new diseases or for a viral cause of unexplained ones, they are most interesting, because the status of virologists in the scientific community depends upon the pathogenic potential of the viruses they study. Due to their location, passenger viruses are thought to have much disease potential, thus their true function goes unnoticed. These colloidal passengers are the silent majority of animal and human intranuclear proteins essential for genetic repair.

Kalokerinos and Dettman quote Dr. Fred Klenner regarding the changeability of viruses: "I am of the opinion that virus units have the potential of going from one type to another by altering their protein coat. We see chicken pox at Thanksgiving, mumps at Christmas, red measles in the spring, and polio and Coxsackie in the summer"[6]. Seasonal appearance of different forms may be mediated by variations of imbalance in the biological terrain or nutritive medium due to the fermentation of dietary excesses such as sugar and animal proteins that accompany holidays and seasons, calling for different repair proteins.

For example, outbreaks of polio have been associated with sugar consumption in summer. Various psycho-emotional stresses correspond to these seasons as well.

Supporting the general idea of dietary culpability is a statement published by the great English physician, Sir Robert McCarrison in 1936: "Obsessed with the invisible microbe, virus, protozoa as all important excitants of disease, subservient to laboratory methods of diagnosis, hidebound by our system of nomenclature, we often forget the most fundamental of all rules for the physician, that the right kind of food (nutrition) is the most important single factor in the promotion of health and the wrong kind of food the most important single factor in the promotion of disease"[7].

Six years before Bechamp identified the microzyma as a ferment and, with his devoted associate, Professor Estor, began a 13-year odyssey of research into its nature, Florence Nightingale published a statement about the germ theory. In Notes on Nursing, 1st ed., 1860, she said of infection:

"Diseases are not individuals arranged in classes, like cats and dogs, but conditions growing out of one another.

Is it not living in a continual mistake to look upon diseases, as we do now, as separate entities, which must exist, like cats and dogs, instead of looking upon them as conditions, like a dirty and a clean condition, and just as much under our own control; or rather, as the reactions of kindly Nature against the conditions in which we have placed ourselves?

I was brought up ... distinctly to believe that smallpox, for instance, was a thing of which there was once a first specimen in the world, which went on propagating itself in a perpetual chain of descent, just as much as that there was a first dog, (or a first pair of dogs), and that smallpox would not begin itself any more than a new dog would begin without their having been a parent dog.

Since then I have seen with my eyes and smelt with my nose smallpox growing up in first specimens, either in close rooms or in overcrowded wards, where it could not by any possibility have been "caught," but must have begun. Nay, more, I have seen diseases begin, grow up, and pass into one another. ... I have seen; for instance, with a little overcrowding, continued fever grow up; and with a little more, typhoid fever; and with a little more, typhus, and all in the same ward or hut.

Would it not be far better, truer, and more practical, if we looked upon disease in this light? For diseases, as all experience shows are adjectives, not noun-substantives.

That is, symptoms (called diseases) are describers of a situation."

I find legitimate Bechamp's conclusion that what are called germs of the air are fundamentally microzymas of beings which are being consumed by the

recycling process, i.e., some kind of vegetative digestion-putrefaction or fermentation. In short, there are no pre-existing disease-germ species. The principles of microbian medicine constitute a fundamental biological error. As Bechamp said, "The microbian doctrine is the greatest scientific silliness of this age." This is not to say that there is no transmission, only that invasion is not necessary for symptogenesis, nor is it the primary mechanism for illness. It is to say that for transmission to take place, susceptibility in the form of a compromised terrain must pre-exist in the receiver, who is then likely to be ill anyway. With the exception of the immune component in the mucosal barrier, primary host "resistance" is a function of terrain condition rather than immunity per se.

Phantom Viruses Hepatitis

Hepatitis can be a painful symptom that has yielded profitable virus-hunting opportunities in recent years. Although there are several categories of this disorder, three main varieties of what is called "acute viral hepatitis" exist: Type A (formerly "infectious hepatitis"), Type B (formerly "serum hepatitis"), and hepatitis C (formerly "non-A, non-B"). The corresponding viruses are HAV, HBV, and the non-A, non-B "group," now called C. Type A is said to be caused by an RNA virus, spread primarily by fecal contamination of water and food, with blood and secretions also possibly being infectious (but it is due to the toxins associated with unsanitary conditions). Hepatitis B, disC 19ered in the '60s, is said to be caused by a DNA virus which replicates in the hepatocyte nucleus and receives its surface coat in the cytoplasm. It is said to be transmitted by transfused blood or blood products, or via common use of needles by intravenous drug users (but it is due primarily to over-acidification from the drugs, especially heroin. The exchange of body fluids into the blood, whether by unsterilized needles, abusive sexual activity, etc., can also play a role over time because of repeated immune stress caused by foreign proteins. Third World babies with poor nutrition and unsanitary conditions around the time of birth are also susceptible.

The third type of hepatitis, disC 19ered in the '70s, is found among drug users and alcoholics, and accounts for 80 to 90% of hepatitis caused by blood

transfusion. It is thus akin to B type and was at first thought by scientists to be hepatitis B until thorough testing of subjects revealed no virus B-nor A, for that matter. It was thus called "non-A, non-B" hepatitis and thought to be at least two viruses and perhaps more.

In 1987 scientists believed they found a single virus causing the third type, what is known today as the hepatitis C virus. However, what they identified was an antibody they associated with a virus. Now, just as with HIV, they could test patients for antibodies against an elusive or invisible virus. With this new observation, however, new paradoxes confronted the viral hypothesis. Huge numbers of people testing positive for the phantom C virus never developed any symptoms. Hepatitis is truly the result of over-acidification or toxification of the largest filter in the human body by such substances as lactic acid, acetic aldehyde and ethanol-not the disease of a pathological virus. It is interesting to note also that all these hepatitis viruses have incubation periods of 2 to 25 weeks, violating Farr's Law (see below), yet are not classified as slow viruses. Also, the point at which a "natural invasion" takes place, as opposed to a highly artificial injective one, and thus, how true incubation periods are determined, is another interesting question.

Hantavirus

A recent example of unwarranted panic in American biomedicine was the eminent hantavirus of 1994. Presumably, it had jumped species, from mouse to man (the American Navaho Indians). However, after supposedly killing a number of people, this phantom virus apparently made peace with the Indians and retired to its mouse reservoir. The virus failed to materialize [8]. A front-page article in the San Francisco Chronicle reported that CDC "epidemiologists across the nation are carefully monitoring the deer mouse population and the level of virus within it." But all that was left to disC 19er of the former "Navaho flu" by the CDC epidemiologists (shown in their space suits) were healthy mice in the mountains [9]. The Navaho flu is nothing new to the native Americans and is most likely tied to sanitation, nutrition and lifestyle.

Ebola

In May 1995, the CDC announced the new, threatening Ebola virus. The deadly killer virus was expected to leave its hidden reservoir in the rain forests of Africa to claim Europe and the United States. An article in Time magazine was peppered with men in space suits and colored electron micrographs of the virus (even though electron microscopes cannot take color pictures). A CDC virologist suggested the virus could leave the rain forest if "we get a virus that is both deadly to man and transmitted in the air." We are thus asked to fear the image of viruses somehow being launched into the air, perhaps by ejection from a host, and then floating on killer breezes to other lands. A more imaginable scenario was suggested by a European epidemiologist who heads the United Nations AIDS program. Echoing the CDC's alarm, he stated, "It's theoretically feasible that an infected person from Kuwait could go to Kinshasa, get on a plane to New York, fall ill, and present transmission risk there." But within a month the virus had disappeared in Africa, and not a single Ebola case was reported in the United States or Europe [10].

The World Health Organization announced originally on December 19, 1995 that the Ebola virus epidemic that killed 245 people in West Africa was over. (This announcement came again in 2014) All tests on any remaining suspected cases were negative. A somewhat unsettling revelation was that every Ebola outbreak in Africa "is associated to have spread through public hospitals" [11]. As it turned out, it was associated with re-used hypodermic needles in these hospitals. Just like hantavirus, Ebola vanished, never to be heard from again. Most interesting is that this epidemic, as epidemics will, stopped without vaccines or other drugs. But consider the impact such stories have made upon our minds and on the way we view and understand germs. What's next in virodrama, the Andromeda Strain?

There is one insidious possibility that must be mentioned in passing. Some mysterious outbreaks of the past have been shown years later to have been man-made. In some cases, government agency has used the public to test releases of organisms and weak biochemical toxins in order to verify, through medical reports, expectations of biowarfare activity. These incidents and the

whole story of such behavior is well documented in the book, A Higher Form of Killing by Robert Harris and Jeremy Paxman. In this scenario, the cause of such an incident would be constructed officially, or left as a mystery, in order to draw attention away from the truth.

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Viruses Work with the Immune System

1) Viruses are NOT a living thing
2) Viruses are created WITHIN a cell
3) Viruses are specific to the cells they are created in
4) For example, viral hepatitis is created in the liver cells and can only affect liver cells… you CANNOT have viral hepatitis anywhere other than the liver…. The flu virus is created in the lungs/sinuses and only affect the lungs/sinuses
5) Viruses are the body's NATURAL response to cellular toxicity… Viruses are used to detoxify the body's cells from toxins

6) Viruses DO NOT attack the cells, they breakdown the toxic residue within cells and this leads to the typical "viral" symptoms
7) Viruses DO NOT live on surfaces outside the body (remember viruses are NOT living things)
8) You CANNOT catch a virus as it is non-living and not infectious (see 1-7 if you don't understand)
9) The appearance of viruses spreading is due to the environmental stimuli experienced by other people… just like women who spend a lot of time together often get their menstrual cycle at the same time, the same happens with our immune systems and that is why our bodies tend to detox (experience a virus) at the same time as others who we spend a lot of time with

--Leif Lion

Measles is NOT A Disease, But a Developmental Process of Childhood.

Measles is NOT a disease, but a developmental process of childhood. Blocking that process with a vaccine stunts the child's physical and emotional development.

No Somatoscopic Observation has Ever Identified Any External Entity Known as a Virus

Somatoscopy is the description of morphological physical characteristics of humankind based on visual observation of morphological traits. Therefore observation of physical characteristics is the basic method of Somatoscopy.

No Somatoscopic observation has ever identified any external entity known as a virus, external to the natural DNA make up of a human body.

Proteins Detected by the C 19 Test Are from The Tested Person's Own Cells

Proteins detected by the C 19 test are from the tested person's own cells, and not from any external virus assault.

The Primary Function of Vaccinations Is to Spread Diseases

What more can be said…

The Virus Wheel of Fortune

By manipulating the public perception of a virus that does not actually exist, the Technocratic Elite have been able to convince the word that there is an Invisible Enemy that they cannot see. Then, test kits are administered, which merely test for basic genetic material that every human has in their body from birth, to assert anything they want, like spinning a wheel of fortune:

1.) You have the virus.
2.) You don't have the virus.
3.) You have built up immunity.
4.) You have not built up immunity.

5.) You are asymptomatic.
6.) You are pre-symptomatic.
7.) You may be have tested false positive.
8.) Just whatever they want to say based upon a bogus test…
9.) Just whatever they want to say based upon a bogus test…

Virologists

Virologist are mainly victims of misinformation and indoctrination. There is a lot of gross theorizing, guesswork, and out-and-out lying in Virology. They can't even isolate a virus, let alone wax eloquently about its mechanisms. Virology is the art of building assumptions upon speculations. The main reason for Virology is for making justifications for Vaccination use:

"Hey, let's introduce a life-threatening disease into your bloodstream so your body can go into shock and become sick. Then, you will create antibodies, right?"

Sure, if you survive the virus and poisons in the Vaccine, you will have some worthless antibodies that will not apply to the next mutational cycle that a potential virus goes though if viruses even work that way.

"Thanks for the lifelong disease, Vaccine."

The Human Microbiome

"The human microbiome is the aggregate of all microbiota that reside on or within human tissues and biofluids along with the corresponding anatomical sites in which they reside, including the skin, mammary glands, placenta, seminal fluid, uterus, ovarian follicles, lung, saliva, oral mucosa, conjunctiva,

biliary tract, and gastrointestinal tract. Types of human microbiota include bacteria, archaea, fungi, protists and viruses."

--

https://en.wikipedia.org/wiki/Human_microbiome#Viruses

The Human Virome

"Virome refers to the assemblage of viruses that is often investigated and described by metagenomic sequencing of viral nucleic acids that are found associated with a particular ecosystem, organism or holobiont. The word is frequently used to describe environmental viral shotgun metagenomes. Viruses, including bacteriophages, are found in all environments and studies of the virome have provided insights into nutrient cycling, development of immunity, and a major source of genes through lysogenic conversion."

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https://en.wikipedia.org/wiki/Virome

But What Exactly is a Virus?

Viruses are small protein capsids that harbor genetic information. In the case of enveloped viruses, an additional lipid bilayer surrounds the capsid. In order to replicate, viruses are completely dependent on their host. They replicate their genetic information within cells, assemble and release viral progenies to infect additional cells, and spread the viral infection. The viruses discussed in this review are enveloped. They pinch off from the producer cell and enter the next cell by membrane fusion. Enveloped viruses can spread via two distinct routes, either through the cell-free aqueous environment or, alternatively, by remaining cell associated and being passed on by direct cell-cell contact. --https://jvi.asm.org/content/84/17/8360

A virus is an infectious particle that reproduces by "commandeering" a host cell and using its machinery to make more viruses. A virus is made up of a

DNA or RNA genome inside a protein shell called a capsid. Some viruses have an external membrane envelope. Viruses are very diverse. They come in different shapes and structures, have different kinds of genomes, and infect different hosts. Viruses reproduce by infecting their host cells and reprogramming them to become virus-making "factories."

Introduction

Scientists estimate that there is roughly 10^31 viruses. To put it another way, there are over ten million times more viruses on Earth than there are stars in the entire universe. It may seem odd that bacteria can get a virus, but scientists think that every kind of living organism is probably host to at least one virus!

What Is A Virus?

A virus is a tiny, infectious particle that can reproduce only by infecting a host cell. Viruses "commandeer" the host cell and use its resources to make more viruses, basically reprogramming it to become a virus factory. Because they can't reproduce by themselves (without a host), viruses are not considered living. Nor do viruses have cells: they're very small, much smaller than the cells of living things, and are basically just packages of nucleic acid and protein.

Still, viruses have some important features in common with cell-based life. For instance, they have nucleic acid genomes based on the same genetic code that's used in your cells (and the cells of all living creatures). Also, like cell-based life, viruses have genetic variation and can evolve. So, even though they don't meet the definition of life, viruses seem to be in a "questionable" zone. (Maybe viruses are actually undead, like zombies or vampires!)

How Are Viruses Different from Bacteria?

Even though they can both make us sick, bacteria and viruses are very different at the biological level. Bacteria are small and single-celled, but they are living organisms that do not depend on a host cell to reproduce. Because of these differences, bacterial and viral infections are treated very differently. For instance, antibiotics are only helpful against bacteria, not viruses.

Bacteria are also much bigger than viruses. The diameter of a typical virus is about 20- 300 nanometers. This is considerably smaller than a typical E. coli bacterium, which has a diameter of roughly 1000 nanometers. Tens of millions of viruses could fit on the head of a pin.

The Structure of a Virus

There are a lot of different viruses in the world. So, viruses vary a ton in their sizes, shapes, and life cycles. Viruses do, however, have a few key features in common.

These include:

- A protective protein shell, or capsid
- A nucleic acid genome made of DNA or RNA, tucked inside of the capsid
- A layer of membrane called the envelope (some but not all viruses)

--https://www.khanacademy.org/science/high-school-biology/hs-human-body-systems/hs-the-immune-system/a/intro-to-viruse

Virus Are Not Actually Alive

To Be or Not to Be

The seemingly simple question of whether or not viruses are alive, which my students often ask, has probably defined a simple answer all these years because it raises a fundamental issue: What exactly defines "life?" A precise scientific definition of life is an elusive thing, but most observers would agree that life includes certain qualities in addition to an ability to replicate. For example, a living entity is in a state bounded by birth and death. Living organisms also are thought to require a degree of biochemical autonomy, carrying on the metabolic activities that produce the molecules and energy needed to sustain the organism. This level of autonomy is essential to most definitions.

Viruses, however, parasitize essentially all biomolecular aspects of life. That is, they depend on the host cell for the raw materials and energy necessary for nucleic acid synthesis, protein synthesis, processing and transport, and all other biochemical activities that allow the virus to multiply and spread. One might then conclude that even though these processes come under viral direction, viruses are simply nonliving parasites of living metabolic systems. But a spectrum may exist between what is certainly alive and what is not.

A rock is not alive. A metabolically active sack, devoid of genetic material and the potential for propagation, is also not alive. A bacterium, though, is alive. Although it is a single cell, it can generate energy and the molecules needed to sustain itself, and it can reproduce. But what about a seed? A seed might not be considered alive. Yet it has a potential for life, and it may be destroyed. In this regard, viruses resemble seeds more than they do live cells. They have a certain potential, which can be snuffed out, but they do not attain the more autonomous state of life.

Another way to think about life is as an emergent property of a collection of certain nonliving things. Both life and consciousness are examples of emergent complex systems. They each require a critical level of complexity or interaction to achieve their respective states. A neuron by itself, or even in a network of nerves, is not conscious—whole brain complexity is needed. Yet even an intact human brain can be biologically alive but incapable of consciousness, or "brain-dead." Similarly, neither cellular nor viral individual genes or proteins are by themselves alive. The enucleated cell is akin to the state of being braindead, in that it lacks a full critical complexity. A virus, too, fails to reach a critical complexity. So, life itself is an emergent, complex state, but it is made from the same fundamental, physical building blocks that constitute a virus. Approached from this perspective, viruses, though not fully alive, may be thought of as being more than inert matter: they verge on life.

--https://www.scientificamerican.com/article/are-viruses-alive-2004/

Again, Viruses Are Not Alive

Definition:

A virus is an infective agent that typically consists of a nucleic acid (chemical compound) molecule in a protein coat. It is too small to be seen by light microscopy and is able to multiply only within the living cells of a host. It cannot grow or multiply outside of a living cell. Origin: Latin ostium for venom (poisonous liquid), and Greek ios poison.

The medical and drug businesses claim that viruses are alive, i.e. that they are bugs just like bacteria and fungus (candida), but that is not true. Viruses are actually created by the body within a cell and is most likely a harmless human nucleic acid (chemical compound), rearranged as a response to poisoning. Dr. Stefan Lanka, virologist, and molecular biologist is internationally mostly known as an "AIDS dissident" who has been questioning the very existence of "HIV" since 1994. In the past years, however, he stumbled over a breathtaking fact: Not even ONE of the (medically relevant) viruses has ever been isolated; there is no proof of their existence: The Viral Fraud.

Also see the book: Virus Mania by Engelbrecht and Kohnlein. Here is the Table of Contents: Viral Fraud Table of Contents.

Therefore, it is totally wrong and harmful to humans and animals to treat them with poisonous vaccines! This includes a long list of "so-called" viruses, including HIV, Hepatitis, Mad Cow disease, swine flu, bird flu, polio, Spanish flu, small pox, measles, chicken pox, herpes simplex, Ebola, Zika, Epstein-Barr (Chronic Fatigue Syndrome), shingles, etc.

--https://www.healingnaturallybybee.com/viruses-are-not-alive

Why Are Viruses Considered Non-Living?

Viruses are considered non-living because they only exhibit characteristics of living organisms when they are occupying a host organism. A virus consists of a single strand of DNA or RNA enclosed in a protein capsule. They lack the internal structures needed for metabolic processes. When not in a host cell they are dormant and have no biological activity. Dormant viruses are called virions. Once a dormant virus comes in contact with a host cell in becomes an active virus and replicates using structures of the host cell. It has the ability to pass its genetic information on to future generations, which is a characteristic of living organisms, but it is unable to do so without a host cell. Virions can remain dormant for very long periods of time.

--https://www.enotes.com/homework-help/why-viruses-considered-non-living-532883

Viruses Are Not Alive and Not Interpersonally Contagious

Viruses are not alive. Viruses are interconnected to exosomes and are not transmittable from person to person. The only way you get a virus is from your own body manufacturing it to assist in cleaning up any imbalances in your body. Viruses are part of the body's natural exosmotic immune response mechanism. Otherwise, you cannot catch a virus from another person. You would have to be injected with a Vaccine to get a virus.

And viruses are specific to each living species, and they cannot crossbreed themselves. They primary help cleanse inside acting as solvents like water.

Now, exosomes are membrane bound extracellular vesicles that are produced in the endosomal compartment of most eukaryotic cells. They are intracellular creations, created inside the human body, and not contagious.

The multivesicular body is an endosome defined by intraluminal vesicles that bud inward into the endosomal lumen. Multivesicular bodies (MVB) are endosomal compartments that sort ubiquitinated membrane proteins by incorporating them into vesicles. In cell biology, a lumen is a membrane-defined space that is found inside several organelles, cellular components, or structures: thylakoid, endoplasmic reticulum, Golgi apparatus, lysosome, mitochondrion, or microtubule. If the MVB fuses with the cell surface, these ILVs (Intraluminal Vesicles) are released as exosomes.

Additionally, exosomes are excretory nano-vesicles that are formed by the cell's endocytic system and shed from the surface of almost all types of cells. These tiny extracellular vesicles, once thought to be "garbage bags for cells," carry a wide variety of molecules of cellular origin, including proteins, lipids, and RNAs, that are selectively incorporated during the formation of exosomes.

Exosomes are known to play a central role in several important biological processes such as cellular communication, intercellular transfer of bioactive molecules, and immune modulation. Recent advances in the field have shown that a number of animal viruses can exploit the exosomal pathway by incorporating specific cellular or viral factors within exosomes, in order to modulate the cellular microenvironment and influence downstream processes such as host immunity and virus spread.

Through exosome biogenesis this normal physiological process is hijacked by some pathogenic viruses. Identifying viral signatures in exosomes and their mode of action is fundamental for any future diagnostic and therapeutic strategies for viral infections. Nevertheless, these exosmotic-viral regions are not contagious. You cannot get a virus from an outside source. A virus does not invade your body. The result of a virus is actually exosmotic, and exosomes are actually protecting your body from toxic cell secretions. All of this occurs internally and intracellularly.

Viral Facts

1. Viruses do not 'exist' outside of petri-dish solutions or a living body.
2. Viruses cannot enter through the skin or eyes. Such vectors do not work because the mucus membranes and the immune system discard small amounts of foreign proteins such as viruses.
3. Viruses cannot enter through wounds because we bleed outwardly, not inwardly.
4. Viruses cannot function without a host cell that manufactures them and encodes them, and viruses cannot replicate without a host cell.
5. Viruses do not 'infect' or 'invade' cells. They are not alive to do so in the first place.
6. Viruses almost never dissolve living tissue, unless in specific circumstances such as polio and degenerative nervous system diseases where metal toxicity is present.
7. Viruses' primary function is to dissolve dead matter.
8. Cells produce different viral strains depending on the condition of the tissue
9. involved.
10. There are 320,000 viral strains inherent to the human body, and each cell contains the viral protein makeup to manufacture each strain when the body calls for it.
11. Viruses are sequenced/encoded by blood cells via RNA/DNA to break down
12. specific dead and dying tissue and waste.
13. Viruses are very specific protein structures.
14. Coughing, sneezing, and spitting is not a vector for the transmission of viruses.
15. Saliva and mucus membranes break down any such particles.
16. Skin is not a vector either because viruses cannot cross dead skin layers.
17. Viruses are a result of internal toxicity caused by the environment
18. Viruses are not living organisms or living microbes.

19. Viruses do not have a respiratory system, nor do they have a nucleus or digestive system.
20. Viruses are not alive.
21. Viruses are not contagious.

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One should be aware of the inner army of viruses within the body that protect the body, constantly. It is not so much that a virus suddenly turns destructive, as it is that the entire cooperative structure of the internal exosmotic environment gets out of balance from environmental toxins, within which all the viruses are involved, and becomes virally threatened.

--Seth/Jane Roberts, The Individual and the Nature of Mass Events, 1979

https://www.facebook.com/search/top/?q=Viruses%20are%20not%20contagious&epa=SEARCH_BOX

Exosomes: A Theory of C 19 RNA Viruses

Respiratory illness is caused by an insult of some kind:

- electromagnetic radiation
- chemical toxins in the environment
- poison, infection (flu, pneumonia)
- stress

- toxic fungi, molds, protozoa, or bacteria in the immediate environment
- poor nutrition

etc…which, in turn, causes the cell to release Exosomes to absorb the toxic assault to the cell membrane. The Exosome acts as a secretion or "soap" to neutralize extra cellular toxins. Exosome do not cause illness, but rather, they are the cells' defense mechanism against toxic assault that would, if left unchecked, kill the cell, and potentially cause bodily death. C 19 are identical in shape, content, function, and location in every way to exosomes, and they both possess keys to unlock the ACE II enzyme, or Angiotensin enzyme, to gain access to the blood transport system.

In other words, what scientists in Wuhan are calling C 19 mzy actually the RNA Virus/Exosomotic intracellular environment under duress. which naturally occurs in the human body to ward of toxins threatening the integrity of the cell membrane and its contents.

The key thing to remember is that what are being referred to as viruses may just the body's natural Exosomes, and they do not come from outside of your body. You cannot catch them from another person. They are manufactured by the cell from within our bodies, as reaction to some foreign invader which threatens to compromise the integrity of the cell.

C 19 is just a misnamed Exosome structure which the body naturally produces to sponge up toxins in order to remove them from your body. The result is cold and flu like symptoms. This natural immune reaction is rarely dangerous or lethal unless you are perhaps 82 years old with previous health conditions.

https://www.youtube.com/watch?v=BzRbq9XJ7mA&fbclid=IwAR2dxZBtDINLzmN59hxp5won2MWHEmAm8JXNoKKLwjs21wuS4na9owA6owU

Viruses May Simply be the Exosome System Absorbing and Clearing Out Foreign Insults to the Immune System

People are allegedly arriving at hospitals with 'symptoms' of CV which actually looks like cellular poisoning, radiation pneumonitis damage, oxygen deprivation, Hypoxia, Thrombosis (blood clotting), and stroke, none of which are related to CV.

A "virus" is something that is formed inside the body under certain immuno-stress conditions to fight certain 'ill' 'affected' cells. Viruses are NOT alive. They are exempt of things essential for life. They contain no nucleus and no other part of a living cell organism. They are not going to attack you via an airborne Kamikaze attack. A virus is a collection of genetic material (DNA or RNA) inside a protein shell, and impotent and as soon as they hit the air, with no way to enter your body unless they are intravenously injected into your blood.

The body just creates more viruses to fight off x, y, z. Viruses act like Exosomes to clean up bacterial wastes, etc… in the intracellular region of your immune system.

If you are wondering why people are getting ill on the Princess Cruise Ships, then look into the 5G network systems they are using. If you radiate the human body enough, the Exosomes will detect a foreign invader and start proliferating to clear out the damage. This can cause a Cytokine Storm.

Cytokine Storm

A severe immune reaction in which the body releases too many cytokines into the blood too quickly. Cytokines play an important role in normal immune responses but having a large amount of them released in the body all at once can be harmful. A cytokine storm can occur as a result of an infection, autoimmune condition, or other disease. It may also occur after treatment with some types of immunotherapy. Signs and symptoms include

high fever, inflammation (redness and swelling), and severe fatigue and nausea. Sometimes, a cytokine storm may be severe, or life threatening and lead to multiple organ failure.

Also called hyper-cytokinemia.

An Exhaustive Look at Exosomes and Their Role in the Life Cycle and Pathogenesis of RNA Viruses

Abstract

Exosomes are membrane-enclosed vesicles actively released into the extracellular space; whose content reflect the physiological/pathological state of the cells they originate from. These vesicles participate in cell-to-cell communication and transfer of biologically active proteins, lipids, and RNAs. Their role in viral infections is just beginning to be appreciated. RNA viruses are an important class of pathogens and affect millions of people worldwide.

Recent studies on Human Immunodeficiency Virus (HIV), Hepatitis C Virus (HCV), human T-cell lymphotropic virus (HTLV), and Dengue Virus (DENV) have demonstrated that exosomes released from infected cells harbor and deliver many regulatory factors including viral RNA and proteins, viral and cellular miRNA, and other host functional genetic elements to neighboring cells, helping to establish productive infections and modulating cellular responses. Exosomes can either spread or limit an infection depending on the type of pathogen and target cells and can be exploited as candidates for development of antiviral or vaccine treatments. This review summarizes recent progress made in understanding the role of exosomes in RNA virus infections with an emphasis on their potential contribution to pathogenesis.

1. Introduction

Exosomes are lipid bilayer membrane-enclosed nano-sized (30–100 nm) vesicles with a density of 1.13–1.19 g/mL, secreted by virtually all cell types, and formed during the maturation of endosomes upon invagination and budding of the limiting membrane of late endosomes as intraluminal vesicles (ILVs) of multivesicular bodies (MVBs).

Exosomes as Carriers of Virus and Host RNA Species

It has been reported that exosomes carry various cellular regulatory RNAs, including miRNAs, sncRNAs, and siRNAs [96]. Exosomes derived from virus-infected cells have been shown to carry viral components including viral mRNA, miRNA, and genomic RNA, as well as genetic regulatory elements. Among the RNA viruses, HIV-1 was the first one to be studied somewhat in detail in the context of modulation of exosome formation. Exosomes derived from HIV-1 infected cells or patients with HIV infection incorporate the viral transactivating response (TAR) element transcribed from the integrated provirus, which has been suggested to enhance HIV replication in the recipient cells via downregulation of apoptotis . Unspliced HIV-1 RNA species are recruited to exosomes and the presence of a stretch of sequences within the 5' end of the Gag p17 open reading frame is sufficient for this recruitment, while single- or double-spliced HIV-1 RNA is not incorporated into exosomes. The incorporation of genomic HIV-1 RNA in exosomes is further increased if the producer cells express HIV-1 defective for viral genome packaging.

Exosomes as Viral Protein Carriers

Exosomal protein composition varies depending on cell type and disease state. Several RNA viruses have been shown to modulate not only host cell protein composition of exosomes but also to recruit their own proteins into exosomes. Exosomes from HIV-1-infected cells have been shown to incorporate both Gag and Nef proteins [109,110]. The latter is incorporated into exosomes upon anchoring into lipid raft microdomains through its N-terminal myristoylation and a stretch of basic amino acids residing in its alpha-helix-1, as well as upon interaction with the host cell protein Mortalin.

Role of Exosomes in Pathogenesis

Immature dendritic cells capture HIV-1 and can transfer these captured HIV-1 particles to T cells. Wiley and Gummuluru, back in 2006, reported that exosomes derived from HIV-1 containing immature dendritic cells can transfer HIV-1 to T cells without de novo infection. Exosomes isolated with HLA-DR-1-conjugated magnetic beads from the supernatant of DCs exposed to HIV-luc reporter viruses incubated with Jurkat T cells resulted in productive infection of cells. They also reported that endocytosed virus particles were the main contributors to exocytosed virus fraction, as treatment of virus-exposed DCs with trypsin had no or a negligible effect on the amount of virus particles precipitated by HLA-DR-1-conjugated magnetic beads.

Although the role of exosomes in HIV infection has not yet been fully understood, increasing evidence suggests that exosomes facilitate both enhancement and inhibition of infection and replication, depending upon the cells of origin. For instance, exosomes derived from HIV-infected cells have been shown to contain the HIV coreceptors CCR5 and CXCR4, and transfer of these coreceptors to uninfected, non-permissive cells may enhance susceptibility to HIV infection. In a recent study, Kadiu et al. reported that a portion of HIV virions shed from monocyte-derived macrophages is associated with exosomal aggregates and these entrapped virions demonstrate improved infectivity toward CD4+ target cells, compared to purified HIV-1 virus particles. HIV-infected and viremic individuals exhibit elevated levels of plasma cytokines. Many cytokines have been found to be markedly enriched in exosomes from HIV-positive individuals relative to negative controls and exposure of naive peripheral blood mononuclear cells to exosomes purified from HIV-positive patients induces CD38 expression on naive and central memory CD4+ and CD8+ T cells, probably contributing to inflammation and viral propagation via bystander cell activation.

Potential Applications in Viral Infections

Exosomes appear to be an important tool of intercellular communication, as discussed above. However, their further use in various other processes is also being evaluated. The exosomes can be used as a diagnostic marker, as vaccines, and as a drug delivery vehicle for targeted or systemic delivery. Since exosomes have been detected in all bodily fluids, can be easily purified, and have a composition that varies in normal and diseased conditions, they can be exploited as diagnostic markers of diseases. However, the use of exosomes as a diagnostic marker for viral infection has not yet been explored adequately.

Targeted delivery is another area where the potential of exosomes to carry therapeutic cargo to specific organs or tissues is being evaluated. Expression of receptor-specific ligand molecules on the exosome surface through genetic engineering can transform exosomes into potent delivery vehicles that can deliver a drug/siRNA/miRNA based therapeutic moiety to cells or tissues of choice. In fact, the ability of exosomes to deliver therapeutic moiety or genetic material can be further improved by incorporating selected viral proteins into exosomes as virus-encoded envelope proteins exhibiting superior binding and entry specificity (reviewed in.

Conclusions

Various studies have demonstrated that exosomes are crucial intercellular communication channels and highlighted their potential role in viral transmission and modulation of immune responses, as viruses exploit the exosomal pathway for their assembly/budding, transfer of viral RNAs, and suppression of immune activation. In addition, exosomes could be utilized as diagnostic markers in viral infections and for targeted drug delivery. Since exosome research related to viral infections is still in an early stage, more studies are required to decipher the interplay between exosome biology and viruses, as a comprehensive understanding of exosome biology and its involvement in viral infections would permit the development of new strategies to interfere with viral replication and disease development.

Acknowledgments

This project was supported by NIH grant R01 AI062885 and P01 AI07924602. The authors would like to thank Cynthia Tribble for manuscript editing and submission.

Author Contributions

1. Harendra Singh Chahar, Xiaoyong Bao, and Antonella Casola planned and wrote the manuscript.
2. Conflicts of Interest
3. The authors declare no conflict of interest.
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A Compromised Immune System Causes Illness and Not Viruses

The Medical Industry is in the business of making money from vaccines and pharmaceuticals. You are constantly being told to bring up the conversation with your doctor about the often-lethal side effects of the pharmaceuticals you take. In other words, these are not medicines. They are poisons. Masking symptoms is known as suppression in homeopathic philosophy. This is seen as the cause of chronic illness. Pharmaceuticals mask symptoms, preventing the body's natural immune response to handle the imbalance.

Pharmaceuticals simply mask a problem. They do not heal anything. The book, ***What Really Makes You Ill? Why Everything You Thought You***

Knew About Disease Is Wrong Paperback by Dawn Lester, clearly shows how the entire medical system is a fraud. There is no scientific evidence that germs or viruses cause disease. Virus are just tiny particles of protein. They are not alive. The CV image that we are been showing is merely an artist rendering. It is a CGI image. Viruses, Germs, and Bacteria do not cause disease. They are the result of some prior imbalance in the body where the body's natural immune system is taking care of an imbalance, but they do not cause disease. There is no scientific evidence to prove that any microorganism causes disease. You will find no credible scientific evidence that these microorganisms cause disease. Try to find it? You will find no micrographs or physical evidence.

Viruses and bacteria are natural reactions to the body's natural immune system trying to overcome some imbalance in the body. Viruses must be introduced into the body though some Vaccine. They do not merely drift through the air or enter the body through skin contact.

The CV is the same thing as a common flu. This is the NWO taking over the world with fear mongering propaganda. Our government is at war with us. This world is run on deceit and lies. Mainstream media is their biggest weapon, used to instill terror and cause fear so that the Satanic Elite can then step in with their Hegelian Dialect to put in place their next step to the Satanic Beast System. Get ready for the chip, they are dying to vaccinate and chip everyone.

We are finally seeing, publicly, that most of Hollywood, the fashion, music, and modelling industries, and most of Politics, are governed by Satanic forces. The governments of the world and the royal elite are not here to take care of you. They are here to kill you. They are not unwittingly trying to kill you. They are deliberately trying to kill you. They are deliberately trying to kill you, but for a reason that eludes even them. Within their trance state, what seems good and right, and what is justified as sound reasoning and socially acceptable, is absolute insanity when held up to the fundamental standard of goodness and wisdom. These psychopaths are convinced that Eugenics and the genocide of all Humanity is noble. Many even think they are the saviors of the remaining humans.

What is coming is far worse than merely a Fascist/Communist World State. What is coming is a devastation so massive humanity is going to plead for a New World Order and a Messianic style leader.

Why the CV is Not Contagious: The Deception of Virology and Vaccines

This post intends to go to the heart of virology and vaccination itself and what vaccination is propped up by – the entirety of virology and vaccine science is predicated on one thing—that viruses are infectious agents that cause disease.

Without this theory, vaccines would not be 'effective' or 'work' in the minds of the people.

Without the virus theory, vaccines would crumble like a house of cards.

Viruses Are Not Living Organisms

- Firstly, viruses are not living organisms or living microbes.
- They do not have a respiratory system, nor do they have a nucleus or digestive system.
- Viruses are not alive, and viruses are not contagious.
- The fear behind CV, for instance, is wholly unwarranted.
- Forget everything you think you know about viruses and bacteria. You have been lied to.
- The science of virology is based upon the study of viruses. However, no real footage of viral activity exists (except for a recently released (2018) short footage of an HIV virus which shows merely 20% of the virus theory process). Such footage is merely 3D animation and models.
- Scientific Encyclopedia states viruses have been obtained for experimentation by means of extremely powerful centrifuges which must be specially built. You just must take their word. You can never test such a claim.

- Viruses are so small that they average around 0.1 microns in size for a typical virus.
- Observation of Viruses Is Inherently Flawed
- Viruses are observed in cell cultures/petri-dish environments.
- Cell cultures are grown in controlled conditions outside their natural environment, wherein cells are artificially kept alive by fluids that are toxic and do damage to cellular activity.
- In such a sterile environment, cells cannot utilize the full range of their normal cleansing methods as they would in the human body.

Immune System Processes

1) Phagocytosis (and all its processes)
2) Bacterial
3) Fungal
4) Parasitical
5) Viral (virus)

- In the processes of phagocytosis, cellular debris and dead and dying tissue are absorbed and discarded for elimination out of the body.
- It is bacteria that first and foremost carry out this process in large part—mainly as scavengers.
- Fungus and parasites are called upon as needed in special cases, and in this process, small amounts of viruses may be utilized to accompany all other processes.
- All these processes are alive, but viruses are not alive.
- In such an artificial environment wherein, cells are kept alive but not healthy by serums, cells will degenerate, and their viral janitors will become prominent.
- Viruses do not multiply on their own. When added to fertile petri-dishes that sustain cellular life, no additional viral protein structures appear.
- Only when cells are added is there multiplication of viral protein structures. However, this is because petri-dishes are not the proper or healthy environment for cells, and so viral waste occurs.

- This is because cells must manufacture viruses to cleanse themselves in such a toxic environment since they do not have access to the full range of their cleansing processes as would occur in the body. I will show why—
- Note: Viruses are necessary to dissolve dead and dying tissue when tissue is so toxic that living microbes cannot feed upon and eliminate those tissues, waste, and cellular debris without being poisoned to death.

When Would Viral Activity Become Prominent?

As stated, viruses may accompany these processes in small amounts. However, viruses will only become prominent when all these other processes have been largely killed due to:

- Environmental toxicity
- Pollution
- Chemical inundation
- Poor air quality
- Poor water quality
- Poor food quality
- Nutritional deficiencies
- Wrong combination or choice of foods
- Medical treatment, such as antibiotics and medications

10) When a body has a high degree of toxicity, bacteria feeding upon that toxic dead matter and tissue will be poisoned to death.
11) When the body is at such a point of systemic toxicity, where bacterial levels and all living microbes in the body have been diminished or killed due to the above reasons, the body will call upon the help of viruses to help cleanse itself.
12) When the body cannot utilize milder methods, such as a cold (usually bacterial), it will utilize the help of non-living protein solvents which are known as viruses. I will show why this is the only logical answer.

13) Viruses help consume and eliminate substances into small particles that can then be expelled via mucous membranes, out through the skin, or through the intestinal tract.
14) Cells produce viruses when their tissues are so toxic that phagocytes, parasites, bacteria, and fungi cannot help cleanse, repair, and regenerate their tissues and fluids.
15) Science states, incorrectly without proof, that viruses originate outside the body, then 'hijack' the RNA or DNA of the cell, and then replicate whilst attacking cells indiscriminately.
16) If this were true, viruses would replicate endlessly, eventually attacking all healthy cells, but they do not.
17) We know that antibodies, a type of white blood cell, regulates the virus.
18) There exists no video evidence of viruses hijacking cells, except for 3D renders, and animations based on theory.

The True Creation of Viruses (simplistic view)

- Science falsely claims that viruses replicate themselves. In reality, it is the cell itself that is producing the virus.
- Notice how viruses are manufactured by a healthy cell but do not destroy it.
- RNA and/or DNA is given by the host cell to dissolve specific substances within the body. If this were not the case, the virus would destroy the cell which created it, but it does not.
- The virus is ejected, damaging part of the cell, but not destroying it completely. The cell is then able to repair itself in time.
- Cells conspire as one unit to cleanse themselves and their surroundings so that new cellular activity can thrive.
- Large amounts of viral activity are present when the body is unable to use milder living microbial detoxification methods to cleanse itself due to systemic toxicity of tissues that poison living microbes.

Steps for Creation of a Virus

9) Viral proteins part of the genome of the living body existing in every cell which determines what type of proteins will be created by a cell is called into action.
10) Viral proteins existing in the cell enter the nucleus of the cell. Viruses are manufactured in their whole form within the cell, and sequenced/encoded via RNA/DNA host directives.
11) The virus leaves the nucleus and is housed in the cell until it leaves the cell.
12) The virus is ejected by the cell, damaging a part of the cell, but not destroying it.
13) Viruses change every 72 hours.
14) Virus replication continues and every 72 hours the first strain is exhausted, and an entirely new set of viruses is then manufactured by cells to continue the job of the previous, until the process is complete.
15) How Viruses are Manufactured | The True Processes of the Virus
16) Viruses do not infect healthy stable cells. They dissolve dead and decaying cells and tissue, dissolving them so that new cellular activity can thrive.

A Good Analogy

Flies appear on dead matter but are not the cause of the dead matter. They are scavengers that break down dead matter. In this way, viruses and bacteria operate in the same exact manner within the body. Without scavengers on Earth to clean up waste, Earth's air would become toxic. The same processes are carried out in the body on a microscopic macro level.

Science states the opposite of what reality dictates to us through our own observation of nature. This is impossible because our bodies are microcosms for the way nature operates outside our bodies. Assuming the opposite of this goes against our observable nature and is foolish.

As stated, when the normal janitorial functions of the body have been largely diminished and killed due to systemic toxicity, cells can no longer maintain themselves. Red blood cells come together as a whole unit to save

themselves and conspire to cleanse themselves by manufacturing solvent protein constructs (virus) that disassemble and break down dead and dying cells, cellular waste, tissue, and foreign debris.

Cells manufacture viruses in their whole form cellularly. In this process, viruses are manufactured directly within the cell using pre-existing viral protein in the cell and genome and are embedded/encoded with RNA and/or DNA by the host cell.

The cell ejects the virus, which is then regulated by white blood cells through that encoding (antibodies), which oversee the processes of the virus. This allows the viral activity to be controlled and regulated properly.

These two functions are united as one process, and they do not act separately. Once the cell ejects this virus, the cell is partially damaged but is not destroyed. The viruses, which are many, consume and dissolve dead, dying and foreign tissue, debris, unhealthy cells, and cellular waste.

This process takes time depending on the toxicity involved. The effects of their elimination are the symptoms experienced in cold or flu. Viruses break these substances down into tiny particles that can then be expelled via mucous, skin, and bowels.

When the process is complete, the body becomes stronger, so long as that person does not continue to toxify his or her body further. If he or she does, such extreme detoxifications will always occur.

Viruses Are Not Contagious

1) Viruses cannot enter through the skin or eyes. Such vectors do not work because the mucus membranes and the immune system discard small amounts of foreign proteins such as viruses.
2) Viruses cannot enter through wounds because we bleed outwardly, not inwardly.
3) Viruses do not 'exist' outside of petri-dish solutions or a living body.
4) Viruses cannot function without a host cell that manufactures them and encodes them, and viruses cannot replicate without a host cell.

5) Viruses do not ‘infect’ or ‘invade’ cells. They are not alive to do so in the first place.
6) Viruses almost never dissolve living tissue, unless in specific circumstances such as polio and degenerative nervous system diseases where metal toxicity is present.
7) Viruses’ primary function is to dissolve dead matter.
8) Cells produce different viral strains depending on the condition of the tissue involved.
9) There are 320,000 viral strains inherent to the human body, 400 million viruses, and each cell contains the viral protein makeup to manufacture each strain when the body calls for it.
10) Viruses are sequenced/encoded by blood cells via RNA/DNA to break down specific dead and dying tissue and waste.
11) Viruses are extremely specific protein structures.
12) **Coughing, sneezing, and spitting is not a vector for the transmission of viruses. Saliva and mucus membranes break down any such particles.**
13) Skin is not a vector either because viruses cannot cross dead skin layers.
14) Viruses are a result of internal toxicity caused by the environment.
15) Viruses are cyclical in animals.
16) Viruses feed upon waste products in the blood and tissue.

The only way to get a virus outside of natural means is via direct injection (vaccine) or blood transfusions of a patient who has a virus. However, in such cases, the body only analyzes it as foreign tissue that must be eliminated.

Since the virus did not originate within the bodily host, that body does not know the time and place that the virus will be active nor does it have the key to decode it (RNA or DNA encoded by the cell) and cannot find the time of its activity.

As such, it is analyzed as a foreign substance that must be eliminated. Protein solvents (viruses) are manufactured of varying strengths to discard this waste if living microbes cannot eliminate it.

Throughout the year, upon season and climatic/temperature changes, the body will dump mass amounts of toxins into the blood for removal. Some of these toxins are so toxic in nature, such as mercury, formaldehyde, and other chemical byproducts, that living microbes cannot feed upon and eliminate them without dying.

Non-living proteins are then manufactured by each cell in the corresponding location of the body where this cleansing is necessary. Those toxic substances are disassembled and broken down by viruses so that the body can eliminate them, restoring homeostasis.

The only way viruses can be used as biological weapons is via injection, period. It is possible that such manmade viral strains are included in regular existing vaccines, and this should not be ruled out as a possibility, but as previously stated, viral strains from outside the body are not recognized.

However, man-made substances that are injected can be designed to provoke extreme reactions in humans via various levels of tissue sterilization and adjuvants.

Viruses cannot cross-species ie, from animal to mankind. It is impossible for humans to develop animal flus—A. Because viruses are not contagious, and, B. Because animal RNA/DNA is not compatible with human RNA/DNA.

The only way animal tissue can be observed in the blood is through injection of animal tissues, which make their way to the blood, bypassing the digestive tract. Only then will swine tissue, or bird tissue, or any such animal tissue appear in the body.

When animal meat is consumed by a human, it is converted into human tissue. Human cells cannot produce animal cells or viruses. If we develop viruses, they are human viruses. Even if animal viruses 'hijacked' human cells, human cells cannot possibly produce animal viruses

CV is a respiratory virus manufactured by cells in the lungs and respiratory areas to cleanse themselves of systemic toxicity.

Such a cold virus occurs and functions in the following way:

Chemically toxic substances from the air are breathed into the lungs and respiratory system>Toxic particles land onto the surface of the lungs and the fluid-filled sacs in the lungs (alveoli) where they cannot be dislodged or dissolved by living microbes because of their toxicity and nature>Specific non-living protein solvent structures (virus) are then manufactured by cells in the respiratory system to disassemble and break down these substances in the lungs>Mild flu-like symptoms usually result, including coughing and fever, which initiates the cleansing and healing process.

Coughing brings blood and nutrients to the respiratory system. The symptoms associated with their removal are what occurs during SARS. Such airborne toxic substances are caused by burning plastics, formaldehyde, and factory tainted air, which encompasses a wide array of very toxic byproducts.

Older individuals with already weakened immune systems are prone to more advanced respiratory virus detoxifications and will account for most deaths. This illness may crop up in millions due to dense populations like in China breathing in such air on a daily basis. This does not mean it is contagious—it's not.

The 4 Main Steps for CV Creation

1. Chemically toxic substances from the air are breathed into the lungs and respiratory system.

2. Toxic particles land onto the surface of the lungs and the fluid-filled sacs in the lungs (alveoli), where they cannot be dislodged or dissolved by living microbes because of their toxicity and nature.

3. Specific non-living protein solvent structures (virus) are then manufactured by cells in the respiratory system to disassemble and break down these substances in the lungs.

4. Mild flu-like symptoms usually result, including coughing and fever, which initiate the cleansing and healing process.

Why Our Body Manufactures Viruses

Obviously, there has been a renewed interest Virology across the world because of Fauci's absolute nonsense junk science about viruses. Many doctors are coming to the forefront to explain what viruses are. You cannot get them another human being, or from the air, or from touching a surface. The body naturally manufactures them. Your body has up to 320,000 viruses at any one time to keep your body healthy. Otherwise, you can get them from or a Vaccination.

The processes of phagocytosis, fungal, parasitical, and bacterial, which are all living microbes, are responsible for consuming and eliminating dead cells, cellular waste, and foreign debris. But when tissue is so toxic from internal and environmental toxins and stress, that those living microbes cannot feed upon and eliminate those substances without being poisoned to death, cells will conspire to cleanse themselves by manufacturing specific non-living solvents know as viruses, which break down and disassemble those substances into particles to be expelled out through the skin, mucus, and bowels.

In short, viruses are an exosomotic level, nonliving secretion that functions as a kind of intracellular "soap".

Viruses leave the cell, damaging only a part of the cell, but not destroying it. Once out of the cell, they are regulated by white blood cell antibodies to dissolve specific tissues and debris necessary to restore relative homeostasis.

Viruses do not destroy the cell wherein they are replicated, yet science states they infect other cells and DO destroy other cells indiscriminately, which has no proof and makes no logical sense. Such a theory is obviously untrue because then viruses would attack every living cell without a cause, killing the body every time, but this does not happen. Viruses only dissolve dead and dying waste in almost all circumstances.

The only time a virus would appear to attack living tissue is when metals are embedded in the tissue, such as polio cases, where viruses have to get into spinal column areas and cleanse tissue. Since metal is hard to remove from the body, it is natural for viruses to break down living tissue to remove those

metals, which gives the illusion that the virus is somehow working against the body. In reality, the virus is attempting to heal the systemic toxicity of the body and reverse it.

Conclusion

There is no other explanation for how the human body maintains itself. It is the only logical answer. The truth has been hidden by science for almost 200 years, yet was revealed long ago in the 1800s by scientists such as **Antoine Béchamp,** who documented in his own experiments that viruses are terrain dependent, non-living agents that break down waste matter, that they come from within, not from without.

Viruses are nothing more than proteins that cleanse. The same is true about cancer. Cancer is another way the body tries to heal itself, by cocooning dead cells in a tumor in which the body is incapable of removing properly so that it can dissolve and cleanse those cells from the body at a later time. The body is miraculous and finds ways to heal no matter the circumstances. It has ways of short-circuiting and short-cutting pathways in times of trouble.

It is sad that modern science has led so many astray in their thinking with regard to their own bodies and how it functions creating nothing but fear and panic, whilst reaping massive amounts of money for those in power as a result. Such fear places a distrust in our own bodies, our neighbors and nature itself, making it appear as if we are powerless in the face of disease; that it is beyond our control and only the medical establishment can save us from ourselves.

How might those in power benefit from such chaos? Explore that thought. This confusion has led to the CV 'outbreak' and the resulting fear and chaos which surrounds this manufactured and blown out of proportion event.

This virus is obviously being used to institute police state style laws and measures around the world and these will only increase if the majority do not wake up to the lies surrounding the nature of viruses and disease.

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--https://www.thebernician.net/the-deception-of-virology-vaccines-why-CV-is-not-contagious-2/?fbclid=IwAR0VmCv6fHVvnwPt5Sfiy3CzJ66AsxZGChm8wB6DcUvwwJYRCcjqhhd1Ark

How Many Viruses are in the Human Body?

Unlike the roughly 40 trillion bacteria in a typical human microbiome, an estimate of the number of viral particles in a healthy adult human is not yet available, although virions generally outnumber individual bacteria 10:1 in nature. In other words, there are roughly 400 trillion viruses in the human body. And they are healthy for your body. So, do not think viruses are some evil alien invader. That is only a Hollywood movie narrative.

Polymerase Chain Reaction (PCR) Testing Cannot Isolate a Specific CV nor he Viral Load

Commenter on Off-Guardian articles on C 19, VirusGuy, explains how PCR (Polymerase Chain Reaction) testing cannot isolate a specific CV nor the viral load.

(While the moniker "VirusGuy" may undermine credibility to a degree I think we can accept that the poster may be concerned about his job and rather than judge by credentials look at what he says which tends to align with Dr Wolfgang Wodarg's words in link below.)

The 'gold standard' in testing for C 19 is laboratory isolated/purified CV particles free from any contaminants and particles that look like viruses but are not, that have been proven to be the cause of the syndrome known as C 19 and obtained by using proper viral isolation methods and controls (not PCR that is currently being used or Serology /antibody tests which do not detect virus as such).

PCR basically takes a sample of your cells and amplifies any DNA to look for 'viral sequences', i.e. bits of non-human DNA that seem to match parts of a known viral genome.

The problem is the test is known not to work.

It uses 'amplification' which means taking a very, very tiny amount of DNA and growing it exponentially until it can be analyzed. Obviously, any minute contaminations in the sample will also be amplified leading to potentially gross errors of disC 19ery.

Additionally, it's only looking for partial viral sequences, not whole genomes, so identifying a single pathogen is next to impossible even if you ignore the other issues.

The Mickey Mouse test kits being sent out to hospitals, at best, tell analysts you have some viral DNA in your cells. Which most of us do, most of

the time. It may tell you the viral sequence is related to a specific type of virus – say the huge family of CV. But that's all.

The idea these kits can isolate a specific virus like C 19 is nonsense.

And that's not even getting into the other issue – viral load.

If you remember the PCR works by amplifying minute amounts of DNA. It therefore is useless at telling you how much virus you may have.

And that's the only question that really matters when it comes to diagnosing illness. Everyone will have a few viruses kicking round in their system at any time, and most will not cause illness because their quantities are too small. For a virus to sicken you need a lot of it, a massive amount of it. But PCR does not test viral load and therefore can't determine if osteogenesis is present in sufficient quantities to sicken you.

If you feel sick and get a PCR test any random virus DNA might be identified even if they aren't at all involved in your sickness which leads to false diagnosis.

--https://occamsrazorterrorevents.weebly.com/blog/CV-hoax-jan-2020

SARS-C 19-2 is the Virus That Causes C 19

CVes are a family of viruses that can cause illnesses such as the common cold, severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS). In 2019, a new CV was identified as the cause of a disease outbreak that originated in China.

The virus is now known as the severe acute respiratory syndrome CV 2 (SARS-C 19-2). The disease it causes is called CV disease 2019 (C 19). In March 2020, the World Health Organization (WHO) declared the C 19 outbreak a pandemic.

-- https://www.mayoclinic.org/diseases-conditions/CV/symptoms-causes/syc-20479963

CVes

CVes are a group of related viruses that cause diseases in mammals and birds. They are very common in most humans and not lethal.

The common cold is often the result of CVes. In humans, CVes can cause respiratory tract infections that can range from mild to lethal. Mild illnesses include some cases of the common cold (which has other possible causes, predominantly rhinoviruses), while more lethal varieties can cause SARS, MERS, and the alleged C 19. Symptoms in other species vary. In chickens, they cause an upper respiratory tract disease, while in cows and pigs they cause diarrhea. There are yet to be vaccines or antiviral drugs to prevent or treat human CV infections.

Corina virus can easily be placed in a Vaccines. Here is a list of some CV:

- Genus: AlphaCV
- Species: Human CV 229E, Human CV NL63, Miniopterus bat CV 1, Miniopterus bat CV HKU8, Porcine epidemic diarrhea virus, Rhinolophus bat CV HKU2, Scotophilus bat CV 512
- Genus BetaCV; type species: Murine CV
- Species: BetaCV 1 (Human CV OC43), Human CV HKU1, Murine CV, Pipistrellus bat CV HKU5, Rousettus bat CV HKU9, Severe acute respiratory syndrome-related CV (SARS-C 19, SARS-C 19-2), Tylonycteris bat CV HKU4, Middle East respiratory syndrome-related CV, Hedgehog CV 1 (EriC 19)
- Genus GammaCV; type species: Infectious bronchitis virus
- Species: Beluga whale CV SW1, Infectious bronchitis virus
- Genus DeltaCV; type species: Bulbul CV HKU11
- Species: Bulbul CV HKU11, Porcine CV HKU15

--Wikipedia

A Sea of Viruses Naturally Keep Us Healthy?

Bacteriophages attack bacteria, and a new study shows that a sea of them may protect the human body.

A century after they were disC 19ered killing bacteria in the feces of World War I soldiers, the viruses known as bacteriophages, or simply phages, are drawing new attention for the role they might play within the human body. Phages have been found most everywhere, from oceans to soils. Now, a study suggests that people absorb up to 30 billion phages every day through their intestines.

Though where the viruses end up is unclear, those data and other recent studies have scientists wondering whether a sea of phages within the body, a ***phagosome** (/ˈfaɡəˌsōm/), might influence our physiology, perhaps by regulating our immune systems. "Basic biology teaching says that phages don't interact with eukaryotic cells," says phage researcher Jeremy Barr of Monash University in Melbourne, Australia, who led the study published this week in mBio. He's now convinced "that's complete BS."

"In cell biology, a phagosome is a vesicle formed around a particle engulfed by a phagocyte via phagocytosis. Professional phagocytes include macrophages, neutrophils, and dendritic cells. A phagosome is formed by the fusion of the cell membrane around a microorganism, a senescent cell or an apoptotic cell." -- Wikipedia

For decades, most medical research on phages focused on turning these bacterial parasites into antibiotics. There have been some compelling success stories, but phage therapy has struggled to become a dependable treatment.

Yet Barr's earlier research showed that phages might naturally help protect us from pathogens. Studying animals ranging from corals to humans, he found that phages are more than four times as abundant in mucus layers, like the ones that protect our gums and gut, as they are in the adjacent

environment. The protein shell of a phage, it turned out, can bind mucins, large secreted molecules that together with water make up mucus.

This works out well for both phages and mucus making animals. Sticking to mucus enables the phages to encounter more of their bacterial prey. And as a result, Barr showed in a series of in vitro studies, the viruses protect the underlying cells from potential bacteria pathogens, providing an additional layer of immunity.

Now, he has found evidence that these viruses can make their way from the gut's mucus into the body. In a lab dish, his team showed that human epithelial cells such as those that line our guts, lungs, and the capillaries surrounding the brain take up phages and transport them across their interior. The transport mechanism remains unknown, but the researchers spotted the viruses enclosed in vesicles within the cells.

What's more, the cells consistently took up phages on the side that in the body faces outward, for example toward the gut lumen, and released them on the opposite, inward-facing side. From the rate at which the epithelial cells took up phages in the lab, the researchers estimated that a person might absorb up to 30 billion in a day.

The new study "nicely" shows how phages might get into the body, says molecular biologist Krystyna Dąbrowska of the Polish Academy of Sciences's Institute of Immunology and Experimental Therapy in Wrocław. But she cautions that a lab dish is different from the gut of a living animal, and some of the cells used for Barr's assays are cancer cells, which might have different rates of phage uptake compared with normal cells.

If phages do get into our tissues, what—if anything—do they do there? Only a few studies address the issue. In 2004, researchers led by Dąbrowska reported that a specific type of phage can bind the membrane of cancer cells, reducing tumor growth and spread in mice. A few years later, Dombrowski's graduate adviser, phage expert Andrzej Gorski, showed that phages can affect the mouse immune system when injected, ramping down T-cell proliferation

and antibody production. In mice, they can even prevent the immune system from attacking transplanted tissues.

Barr thinks that in humans, a steady influx of the viruses creates an "intrabody phagosome," which may modulate immune responses. Work published this year by a team of Belgium-based researchers may back up this idea: When white blood cells taken from healthy people were exposed to five different phage species, the cells produced mainly immune molecules known to reduce flulike symptoms and inflammation. And in another hint of an immune link, a group led by immunologist Herbert Virgin at Washington University School of Medicine in St. Louis in Missouri found that people with two autoimmune conditions, type 1 diabetes, and inflammatory bowel disease, have altered gut phagosomes.

Virgin cautions that his findings are only associations. But Barr goes on to speculate that the phagosome might also alert the immune system to the presence of potential pathogens. A bacterial infection would bring a wave of new phages into the body—the parasites of the invading bacteria—which might somehow touch off an inflammatory response that could target the bacteria.

Once scientists understand the role of the human phagosome, they could start thinking about using phages to manipulate the bacterial communities within our body and maybe even control our own cells, Barr says. But he, too, is cautious, noting that "phage biology is an inch wide and a mile deep." Given our current ignorance of phage eukaryote interactions, says Barr, medical uses "are probably decades away."

--https://www.sciencemag.org/news/2017/11/does-sea-viruses-inside-our-body-help-keep-us-healthy#

The Exosmotic Elements of the Human Immune System

Now more people have to learn that their immune system isn't just one thing, which is why it is called a system. The immune system includes our liver, kidneys, exsomotic and viral intracellular structures, and the other organs, including our skin. If we expose these organs to toxins, they become damaged, and then our immune system is damaged.

There are so many things that just our skin comes into contact with that are toxic and compromise our immune system. Our skin is our largest organ, and so you have shampoos, conditioners, hair dyes, creams, ointments, sun blockers, bug sprays, perfumes, Chemtrails, and stress etc… that pose a multipronged attack on our immune system, all day.

Then when you consider the inner organs, the bad foods we eat, the bad things we drink, the bad medications we take, it is amazing that more people, especially in the Western Hemisphere, do no walk around with the flu and colds.

An Overview of The Immune System

The immune system is designed to defend the body against foreign or dangerous invaders. Such invaders include

1) Microorganisms (commonly called germs, such as bacteria, viruses, and fungi)
2) Parasites (such as worms)
3) Cancer cells
4) Transplanted organs and tissues

To defend the body against these invaders, the immune system must be able to distinguish between

- What belongs in the body (self)
- What does not (non-self or foreign)

Antigens are any substances that the immune system can recognize and that can thus stimulate an immune response. If antigens are perceived as dangerous (for example, if they can cause disease), they can stimulate an immune response in the body. Antigens may be contained within or on bacteria, viruses, other microorganisms, parasites, or cancer cells. Antigens may also exist on their own—for example, as food molecules or pollen.

A normal immune response consists of the following:

1) Recognizing a potentially harmful foreign antigen
2) Activating and mobilizing forces to defend against it
3) Attacking it
4) Controlling and ending the attack

If the immune system malfunctions and mistakes self for non-self, it may attack the body's own tissues, causing an autoimmune disorder, such as rheumatoid arthritis, Hashimoto thyroiditis, or systemic lupus erythematosus (lupus).

Disorders of the immune system occur when:

1) The body generates an immune response against itself (an autoimmune disorder).
2) The body cannot generate appropriate immune responses against invading microorganisms (an immunodeficiency disorder).
3) The body generates an excessive immune response to often harmless foreign antigens and damages normal tissues (an allergic reaction).
4) Components of the Immune System

5)

The immune system has many components:

1) Antibodies (immunoglobulins) are proteins that are produced by white blood cells called B cells and that tightly bind to the antigen of an invader, tagging the invader for attack or directly neutralizing it. The body produces thousands of different antibodies. Each antibody is specific to a given antigen.
2) Antigens are any substance that the immune system can recognize and that can thus stimulate an immune response.
3) B cells (B lymphocytes) are white blood cells that produce antibodies specific to the antigen that stimulated their production.
4) Basophils are white blood cells that release histamine (a substance involved in allergic reactions) and that produce substances to attract other white blood cells (neutrophils and eosinophils) to a trouble spot.
5) Cells are the smallest unit of a living organism, composed of a nucleus and cytoplasm surrounded by a membrane.
6) Chemotaxis is the process of by which a chemical substance attracts cells to a particular site.

The complement system consists of a group of proteins that are involved in a series of reactions (called the complement cascade) designed to defend the body—for example, by killing bacteria and other foreign cells, making foreign cells easier for macrophages to identify and ingest, and attracting macrophages and neutrophils to a trouble spot.

Cytokines are numerous different proteins that are secreted by immune and other cells and that act as the immune system's messengers to help regulate an immune response.

Dendritic cells are derived from white blood cells. They reside in tissues and help T cells recognize foreign antigens.

Eosinophils are white blood cells that kill bacteria and other foreign cells too big to ingest, and they may help immobilize and kill parasites and help destroy cancer cells. Eosinophils also participate in allergic reactions.

Helper T cells are white blood cells that help B cells produce antibodies against foreign antigens, help killer T cells become active, and stimulate macrophages, enabling them to ingest infected or abnormal cells more efficiently.

Histocompatibility (literally, compatibility of tissue) is determined by human leukocyte antigens (self-identification molecules). Histocompatibility is used to determine whether a transplanted tissue or organ will be accepted by the recipient.

Human leukocyte antigens (HLA) are a group of identification molecules located on the surface of all cells in a combination that is almost unique for each person, thereby enabling the body to distinguish self from non-self. This group of identification molecules is also called the major histocompatibility complex.

- An immune complex is an antibody attached to an antigen.
- An immune response is the reaction of the immune system to an antigen.
- Immunoglobulin is another name for antibody.
- Interleukin is a type of messenger (cytokine) secreted by some white blood cells to affect other white blood cells.
- Killer (cytotoxic) T cells are T cells that attach to infected cells and cancer cells and kill them.
- Leukocyte is another name for a white blood cell, such as a monocyte, a neutrophil, an eosinophil, a basophil, or a lymphocyte (a B cell or T cell).
- The lymphatic system is a network of lymph nodes connected by lymphatic vessels that helps the body transport microorganisms and dead or damaged cells to be filtered out and destroyed. Acquired immune responses are initiated in the lymph nodes.

- Lymphocytes are the white blood cells responsible for acquired (specific) immunity, including producing antibodies (by B cells), distinguishing self from none-self (by T cells), and killing infected cells and cancer cells (by killer T cells).
- Macrophages are large cells that develop from white blood cells called monocytes. They ingest bacteria and other foreign cells and help T cells identify microorganisms and other foreign substances. Macrophages are normally present in the lungs, skin, liver, and other tissues.
- Major histocompatibility complex (MHC) is a synonym for human leukocyte antigens.
- Mast cells are cells in tissues that release histamine and other substances involved in inflammatory and allergic reactions.
- A molecule is a group of atoms chemically combined to form a unique substance.
- Natural killer cells are a type of white blood cell that can recognize and kill abnormal cells, such as certain infected cells and cancer cells, without having to first learn that the cells are abnormal.
- Neutrophils are white blood cells that ingest and kill bacteria and other foreign cells.
- Phagocytes are a type of cell that ingests and kills or destroys invading microorganisms, other cells, and cell fragments. Phagocytes include neutrophils and macrophages.
- Phagocytosis is the process of a cell engulfing and ingesting an invading microorganism, another cell, or a cell fragment.
- A receptor is a molecule on a cell's surface or inside the cell that can identify specific molecules, which fit precisely in it—as a key fits in its lock.
- Regulatory (suppressor) T cells are white blood cells that help end an immune response.
- T cells (T lymphocytes) are white blood cells that are involved in acquired immunity. There are three types: helper, killer (cytotoxic), and regulatory.

- White blood cells (leukocytes) exist in several different types, such as monocytes, neutrophils, eosinophils, basophils, and lymphocytes (B cells and T cells), each of which have different roles in the immune system.

Lines of Defense

The body has a series of defenses. Defenses include

Physical barriers

White blood cells

Molecules such as antibodies and complement proteins

Lymphoid organs

Physical barriers

The first line of defense against invaders is mechanical or physical barriers:

1) The skin
2) The cornea of the eyes
3) Membranes lining the respiratory, digestive, urinary, and reproductive tracts

As long as these barriers remain unbroken, many invaders cannot enter the body. If a barrier is broken—for example, if extensive burns damage the skin—the risk of infection is increased.

In addition, the barriers are defended by secretions containing enzymes that can destroy bacteria. Examples are sweat, tears in the eyes, mucus in the respiratory and digestive tracts, and secretions in the vagina.

White blood cells

The next line of defense involves white blood cells (leukocytes) that travel through the bloodstream and into tissues, searching for and attacking microorganisms and other invaders.

This defense has two parts:

1) Innate immunity
2) Acquired immunity

Innate (natural) immunity: Innate means something a person is born with. So innate immunity does not require a previous encounter with a microorganism or other invader to work effectively. It responds to invaders immediately, without needing to learn to recognize them. Several types of white blood cells are involved:

Phagocytes ingest invaders. Phagocytes include macrophages, neutrophils, monocytes, and dendritic cells.

Natural killer cells are formed ready to recognize and kill cancer cells and cells that are infected with certain viruses.

Some white blood cells (such as basophils and eosinophils) release substances involved in inflammation, such as cytokines, and in allergic reactions, such as histamine. Some of these cells can destroy invaders directly.

Acquired (adaptive or specific) immunity: In acquired immunity, white blood cells called lymphocytes (B cells and T cells) encounter an invader, learn how to attack it, and remember the specific invader so that they can attack it even more efficiently the next time they encounter it. Acquired immunity takes time to develop after the initial encounter with a new invader because the lymphocytes must adapt to it. However, thereafter, response is quick. B cells and T cells work together to destroy invaders. To be able to recognize invaders, T cells need help from cells called antigen-presenting cells (such as dendritic cells—see figure How T Cells Recognize Antigens). These cells ingest an invader and break it into fragments.

Molecules

Innate immunity and acquired immunity interact, influencing each other directly or through molecules that attract or activate other cells of the immune system—as part of the mobilization step in defense.

These molecules include

1) Cytokines (which are the messengers of the immune system)
2) Antibodies
3) Complement proteins (which form the complement system)

These substances are not contained in cells but are dissolved in a body fluid, such as plasma (the liquid part of blood).

Some of these molecules, including some cytokines, promote inflammation.

Inflammation occurs because these molecules attract immune system cells to the affected tissue. To help get these cells to the tissue, the body sends more blood to the tissue. To carry more blood to the tissue, blood vessels expand and become more porous, allowing more fluids and cells to leave blood vessels and enter the tissue. Inflammation thus tends to cause redness, warmth, and swelling. The purpose of inflammation is to contain the infection so that it does not spread. Then other substances produced by the immune system help the inflammation resolve and damaged tissues heal. Although inflammation may be bothersome, it indicates that the immune system is doing its job. However, excessive, or long-term (chronic) inflammation can be harmful.

Lymphoid organs

The immune system includes several organs in addition to cells dispersed throughout the body. These organs are classified as primary or secondary lymphoid organs.

The primary lymphoid organs are the sites where white blood cells are produced and/or multiply:

The bone marrow produces all the different types of white blood cells, including neutrophils, eosinophils, basophils, monocytes, B cells, and the cells that develop into T cells (T cell precursors).

In the thymus, T cells multiply and are trained to recognize foreign antigens and to ignore the body's own antigens. T cells are critical for acquired immunity.

When needed to defend the body, the white blood cells are mobilized, mainly from the bone marrow. They then move into the bloodstream and travel to wherever they are needed.

Lymphatic System: Helping Defend Against Infection

The lymphatic system is a vital part of the immune system, along with the thymus, bone marrow, spleen, tonsils, appendix, and Peyer patches in the small intestine.

The lymphatic system is a network of lymph nodes connected by lymphatic vessels. This system transports lymph throughout the body.

Lymph is formed from fluid that seeps through the thin walls of capillaries into the body's tissues. This fluid contains oxygen, proteins, and other nutrients that nourish the tissues. Some of this fluid reenters the capillaries and some of it enters the lymphatic vessels (becoming lymph).

Small lymphatic vessels connect to larger ones and eventually form the thoracic duct. The thoracic duct is the largest lymphatic vessel. It joins with the subclavian vein and thus returns lymph to the bloodstream.

Lymph also transports foreign substances (such as bacteria), cancer cells, and dead or damaged cells that may be present in tissues into the lymphatic vessels and to lymph nodes for disposal. Lymph contains many white blood cells.

All substances transported by the lymph pass through at least one lymph node, where foreign substances can be filtered out and destroyed before fluid is returned to the bloodstream. In the lymph nodes, white blood cells can collect, interact with each other and with antigens, and generate immune responses to foreign substances. Lymph nodes contain a mesh of tissue that is tightly packed with B cells, T cells, dendritic cells, and macrophages. Harmful microorganisms are filtered through the mesh, then identified and attacked by B cells and T cells.

Lymph nodes are often clustered in areas where the lymphatic vessels branch off, such as the neck, armpits, and groin.

Lymphatic System: Helping Defend Against Infection

The secondary lymphoid organs include the

1) Spleen
2) Lymph nodes
3) Tonsils
4) Appendix
5) Peyer patches in the small intestine

These organs trap microorganisms and other foreign substances and provide a place for mature cells of the immune system to collect, interact with each other and with the foreign substances, and generate a specific immune response.

The lymph nodes are strategically placed in the body and are connected by an extensive network of lymphatic vessels—the lymphatic system. The lymphatic system transports microorganisms, other foreign substances, cancer cells, and dead or damaged cells from the tissues to the lymph nodes, where these substances and cells are filtered out and destroyed. Then the filtered lymph is returned to the bloodstream.

Lymph nodes are one of the first places that cancer cells can spread. Thus, doctors often evaluate lymph nodes to determine whether a cancer has spread. Cancer cells in a lymph node can cause the node to swell. Lymph nodes can also swell after an infection because acquired immune responses to infections are generated in lymph nodes. Sometimes lymph nodes swell because bacteria that are carried to a lymph node are not killed and cause an infection in the lymph node (lymphadenitis).

Lymph nodes contain a mesh of tissue where harmful microorganisms and dead or damaged cells are filtered out and destroyed.

Plan of Action

A successful immune response to invaders requires

1) Recognition

2) Activation and mobilization
3) Regulation
4) Resolution
5) Recognition

To be able to destroy invaders, the immune system must first recognize them. That is, the immune system must be able to distinguish what is non-self (foreign) from what is self. The immune system can make this distinction because all cells have identification molecules (antigens) on their surface. Microorganisms are recognized because the identification molecules on their surface are foreign.

In people, the most important self-identification molecules are called

- Human leukocyte antigens (HLA), or the major histocompatibility complex (MHC)

HLA molecules are called antigens because if transplanted, as in a kidney or skin graft, they can provoke an immune response in another person (normally, they do not provoke an immune response in the person who has them). Each person has an almost unique combination of HLAs. Each person's immune system normally recognizes this unique combination as self. A cell with molecules on its surface that are not identical to those on the body's own cells is identified as being foreign. The immune system then attacks that cell. Such a cell may be a cell from transplanted tissue or one of the body's cells that has been infected by an invading microorganism or altered by cancer. (HLA molecules are what doctors try to match when a person needs an organ transplant.)

How T Lymphocytes Recognize Antigens

Some white blood cells—B cells (B lymphocytes)—can recognize invaders directly. But others—T cells (T lymphocytes)—need help from cells called antigen-presenting cells:

1) Antigen-presenting cells ingest an invader and break it into fragments.

2) The antigen-presenting cell then combines antigen fragments from the invader with the cell's own HLA molecules.
3) The combination of antigen fragments and HLA molecules is moved to the cell's surface.
4) A T cell with a matching receptor on its surface can attach to part of the HLA molecule presenting the antigen fragment, as a key fits into a lock.
5) The T cell is then activated and begins fighting the invaders that have that antigen.

How T Cells Recognize Antigens

T cells are part of the immune surveillance system. They travel through the bloodstream and lymphatic system. When they reach the lymph nodes or another secondary lymphoid organ, they look for foreign substances (antigens) in the body. However, before they can fully recognize and respond to a foreign antigen, the antigen must be processed and presented to the T cell by another white blood cell, called an antigen-presenting cell. Antigen-presenting cells consist of dendritic cells (which are the most effective), macrophages, and B cells.

How T Cells Recognize Antigens

Activation and mobilization

White blood cells are activated when they recognize invaders. For example, when the antigen-presenting cell presents antigen fragments bound to HLA to a T cell, the T cell attaches to the fragments and is activated. B cells can be activated directly by invaders. Once activated, white blood cells ingest or kill the invader or do both. Usually, more than one type of white blood cell is needed to kill an invader.

Immune cells, such as macrophages and activated T cells, release substances that attract other immune cells to the trouble spot, thus mobilizing defenses. The invader itself may release substances that attract immune cells.

Regulation

The immune response must be regulated to prevent extensive damage to the body, as occurs in autoimmune disorders. Regulatory (suppressor) T cells help control the response by secreting cytokines (chemical messengers of the immune system) that inhibit immune responses. These cells prevent the immune response from continuing indefinitely.

Resolution

Resolution involves confining the invader and eliminating it from the body. After the invader is eliminated, most white blood cells self-destruct and are ingested. Those that are spared are called memory cells. The body retains memory cells, which are part of acquired immunity, to remember specific invaders and respond more vigorously to them at the next encounter.

--https://www.merckmanuals.com/home/immune-disorders/biology-of-the-immune-system/overview-of-the-immune-system

Viruses of the Human Body

Many of our resident viruses are beneficial.

Since the dawn of microbiology, researchers have focused on pathogens that make us and our domesticated animals and plants sick. Because the onset of symptoms was the only way to know if specific viruses were present years ago, the most well-studied viruses are those that cause disease. But many viruses chronically infect humans without inducing disease, except perhaps in the very young, the very old, or the immunosuppressed.

In recent years, great leaps in genomic sciences have allowed researchers to detect viruses living in and on the human body—collectively called the human virome. Recent genomic explorations of human samples have revealed dozens of previously unrecognized viruses resident in our gut, lung, skin, and

blood. Some of these newly identified viruses may underlie mysterious, unexplained diseases, but it is also possible that some of these viruses are harmless in most people, most of the time. Knowing how these newly disC 19ered viruses affect humans will allow us to determine whether they are to be prevented, treated, ignored, or even encouraged.

A Spectrum of Viruses

Researchers can now identify viruses present using metagenomic analyses. This is achieved by comparing the genetic information from next-generation sequencing of clinical samples to the genomes of all known viruses. These include viruses that infect all branches of life, from humans to plants and bacteria. When a sample contains a previously identified virus, its genetic sequences can show upward of 80 percent similarity to viral sequences in public databases such as the National Center for Biotechnology Information and the European Nucleotide Archive. Such similarities are easily identified computationally.

Great leaps in genomic sciences have allowed researchers to detect viruses living in and on the human body—collectively called the human virome.

More challenging are novel viruses whose DNA or RNA genome does not show a significant match to that of any known viruses. In these cases, researchers can translate viral genes into proteins in silico and computationally search for related viral protein sequences. Due to the redundancy of the genetic code and the need to maintain basic protein structures and active sites, protein sequences evolve at a slower rate than their genes and are therefore recognizable over longer evolutionary time.

With this new ability to rapidly characterize viral genomes, data acquisition is outpacing our understanding of the viruses' role in health and disease. A few years ago, only two polyomaviruses were known to infect humans. Using metagenomics approaches, researchers have identified 13 known human polyomavirus strains, and have linked some of these with diseases ranging from neurological or kidney damage in immunosuppressed

transplant and AIDS patients to skin cancers.1 Most of these polyomaviruses infect a majority of people during childhood and are then silently carried until a weakened immune system unleashes them to wreak havoc.

Such occasional pathogenicity is typical of viral families found in humans. For example, some human papillomaviruses are found on the skin of most healthy adults and go unnoticed,2 while a few specific papillomaviruses can induce cervical or anal cancers (now preventable by early vaccination). Similarly, herpesviruses are nearly universal infections in adults, where they set up lifelong, symptom-free residence in neurons or cells of the immune system. Later in life or following immunosuppression, latent herpesviruses can reactivate and induce diseases ranging from cold sores to meningitis, lymphomas, or Kaposi's sarcoma.

Occasional Pathogen:

Human papillomaviruses can induce skin infections and cervical cancer, but many strains are commonly found on the skin of healthy people. Viral diameter approximately 55 nm.

A rarely studied group of viruses called anelloviruses may claim the prize as the most common human viral infection; they can be detected in the blood of almost 100 percent of adults. Anelloviruses are transmitted very soon after birth and multiple strains can establish persistent viremia in the same person. Because of their level of genetic diversity—the highest of any viral family—anelloviruses may infect different tissues with different consequences. And as with papillomaviruses, it is conceivable that only a subset of anelloviruses may turn pathogenic.

Whether such common and persistent viruses affect health is still being sorted out. A frequent consequence of chronic and acute viral infection is immune overstimulation. The increasing concentration of anelloviruses seen in immune-suppressed individuals indicates that anelloviruses remain under immunological control and may therefore result in low-level chronic inflammation, known to result in myriad health problems.

Despite this potential for affecting health, there is as yet no direct evidence that anellovirus infections are harmful. Their ubiquity and lack of acute pathogenicity does point to a long and successful coevolution with humans. Because anelloviruses infect nearly everyone, however, their potential impact on heath is particularly difficult to determine. Fortunately, scientists have recently disC 19ered anelloviruses in monkeys and rodents, providing means to study these viruses' pathogenicity in these animal models both in isolation and together with other common infections.

Beside the nearly universal blood-borne viruses described above, a cornucopia of other recently disC 19ered viruses can be detected in respiratory and fecal samples of healthy persons, particularly children. These viruses include a growing number of astroviruses, parvoviruses, picornaviruses, picobirnaviruses, and others whose roles in health and disease also remain largely unknown.

This flood of new information regarding our virome indicates that, even when in perfect health, we are chronically infected by several types of viruses and often transiently infected by yet others. The perception that every human virus causes disease is therefore yielding to a much more complex biological reality.

Is It A Pathogen?

Research funding has generally followed the actual or anticipated disease burden caused by clearly pathogenic viruses such as HIV, HCV, or, recently, Zika virus. Given the large number of viruses detected in healthy hosts, it is likely that some of the viruses initially found in sick hosts are simply harmless coincidental infections. Thus, before newly characterized viruses are deemed pathogenic, and therefore worthy of public or commercial investments, their disease-causing abilities must be stringently vetted.

To assess pathogenicity, researchers still rely on the four postulates for pathogenicity established by German physician and microbiologist Robert Koch in the late 1800s: 1) the agent is found in only those people with the disease, 2) the agent can be isolated from diseased individuals, 3) inoculation

with the agent causes disease, and 4) the virus can be re-isolated from the inoculated individuals.

But satisfying these postulates for human viruses is a tall order. Firstly, many viruses cannot be purified and grown in culture. Moreover, because human inoculations are unethical, researchers need to use animal models, such as rhesus macaques and mice—and many human viruses only infect humans.

Alternatively, researchers can try to demonstrate that the virus is found replicating at the site of pathology: the liver for hepatitis, for example, or the brain for encephalitis. Detecting only a single virus in diseased tissues—a feat made possible by deep sequencing—can also provide supporting evidence for its culpability. But this approach also has its limitations, as human necropsies are costly and thus rarely performed, often leaving blood as the only available tissue type for study. In such cases, measuring the emergence of antibody response to a new virus to show that the timing of the viral infection corresponds to the onset of the immune response can help identify a likely culprit.

Case-control studies that compare virus detection rates in patients or animals with similar symptoms versus healthy controls can provide powerful evidence of virus-disease association. Such studies control for age, geographic origin, gender, socioeconomic status, and even time of year of sample collection, leaving only the disease state to differentiate the two groups. Most viruses are neither consistently pathogenic nor always harmless, but rather can result in different outcomes depending on the health and immunological status of their hosts. The less pathogenic a virus is—the lower the percentage of infected people who become sick—the larger such case-control studies need to be to detect a difference between the groups.

Benefiting from Our Viruses

Viral infections at a young age may help our immune system develop properly, providing protection against later infections and preventing immune overreactions that lead to allergies. Viral infections of the respiratory and gastrointestinal tracts of healthy infants are now known to be common and

often asymptomatic, likely thanks to protection by maternal antibodies delivered across the placenta and via breast milk. Such attenuated infections might provide a form of natural vaccination against later infections with related, more-pathogenic viruses. Just as the proper development of the human gut and immune system in infants is dependent on the presence of a bacterial gut microbiome, a recent study found that early enteric viral infection could have a similar beneficial effect in mice.4 Specifically, mouse norovirus, a commensal relative of a common human pathogen, restored intestinal morphology and immunological function that was perturbed in germ-free or antibiotic-treated newborn mice.5

Commensal viruses may also provide protection against pathogenic infections with other viruses. Unexpectedly, a virus in the same family as hepatitis C virus (HCV), Zika, and dengue has been reported to mitigate the consequences of HIV infection. This virus, known as pegivirus C or GBV-C, was originally disC 19ered in an unexplained case of acute hepatitis,6 but researchers subsequently showed it to be a common infection unrelated to the disease. It's estimated that three-quarters of a billion people are persistently infected with pegivirus C, while even more possess antibodies from earlier, cleared infections.7 Multiple studies have shown that HIV patients infected with pegivirus C tend to live longer than HIV-infected subjects without the coinfection.8 The mechanism behind the phenomenon is unknown, but may involve blocking interactions with cell-surface receptors or intracellular components required for HIV replication.

Another potential benefit of resident viruses is related to their preference for rapidly dividing cells. Anecdotal observations of spontaneous cancer regressions coincidental with viral infections have indicated that viruses may preferentially infect cancer cells, and several promising oncolytic viral therapies are being developed to fight human tumors.9,10 Whether viral infections and lysis of cancer cells is a common natural phenomenon remains an intriguing question.11

Viruses in our DNA

In addition to the viruses that can infect us, humans (and all other vertebrates) have traces of past viral infections integrated into our very own genomes. About 8 percent of the human genome consists of retroviral DNA sequences that have inserted themselves into the human germline, where some of their functions have been adopted to serve essential functions for their host's survival and development.12

The Human Virome:

Diverse viruses can be found commingling with human and bacteria cells in and on people's bodies. Scientists are just beginning to understand how these viruses help and when they can turn pathogenic.

Expressed proteins from such endogenous retroviruses can bind to and block cellular receptors that might otherwise be used by exogeneous, pathogenic retroviruses.13 The membrane fusion activity of some endogenous retroviruses has also become essential for certain cellular functions of the host. For example, endogenous retroviral envelope proteins are responsible for fusion of trophoblast cells into the structures of the mammalian placenta that mediate nutrient and gas exchange between maternal and fetal systems.14 Recently, researchers found that one of these viral proteins essential to placental development, called syncytin, also increased fusion of myoblast cells during muscle-fiber formation: male mice, but not females, lacking this retroviral gene for syncytin showed a 20 percent reduction in muscle mass.15 The same virus-descended gene involved in the formation of the placenta is also involved in a sexual dimorphism (greater muscle mass in males) typical of placental animals.

Vertebrates have also coopted a number of integrated retroviral promoters to provide a means for tight, coordinated control of the expression of multiple genes during early embryonic development.16 Clearly, our very long evolutionary history in a bacteria- and virus-rich environment has driven human adaptation to many such infections, from the cellular level—domestication of retroviral genes and hyperreactive immune systems—to the cultural: adaptations intended to reduce the burden of infectious diseases.

Future of Human Viromics

VIRUSES IN THE GENOME: Endogenous retroviral proteins are essential to cell fusion events that occur during the development of the mammalian placenta. A recent study also found that this same protein, called syncytin, increased myoblast cell fusion in male mice, helping them acquire muscle mass. (Shown here is a color-enhanced electron micrograph of a multinucleate syncytiotrophoblast layer of placenta.)

The detection of viral infections will become faster and more sensitive as sequencing and computational platforms continue to improve, and as researchers generate a more complete catalog of human-infecting viral genomes. The ability to analyze a blood drop, respiratory swab, or fecal sample and report its complete viral content within hours or even minutes could enable public-health workers to rapidly understand and better control infectious disease outbreaks, and may one day become standard practice in diagnostic labs or even used directly by consumers. The rapid identification of known viral pathogens could reduce needless antibiotic use and the corresponding spread of antibiotic resistance in bacteria.

Genomic approaches will also allow large molecular epidemiological studies to measure exactly which viruses are associated with what diseases in different geographic regions. This information will determine which viruses are responsible for the greatest disease burden and help determine those vaccines and transmission-reduction steps that will be most effective. Ambitious plans are also afoot to sequence all viruses in all mammal species and to predict which are most likely to spill over into humans. It's also possible for human viruses to become more pathogenic through mutation or by recombination with animal viruses. A better understanding of what makes some viruses pathogenic, alongside constant monitoring of the human virome in health and in disease, particularly in hot spots of human-animal interaction, may provide early warning signs of the next great viral pandemic.

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Virus Mania

Avian Flu (H5N1), Cervical Cancer (HPV), SARS, BSE, Hepatitis C, AIDS, Polio, C 19, etc…How the Medical Industry Continually Invents Epidemics, Making Billion-Dollar Profits at Our Expense, a book by Torsten Engelbrecht and Claus Köhnlein.

The authors of the book, ***Virus Mania***, journalist Torsten Engelbrecht and doctor of internal medicine Claus Köhnlein, show that these alleged contagious viruses are, in fact, particles produced by the cells themselves as a consequence of certain stress factors such as drugs. These particles are then identified by antibody and PCR tests and interpreted as epidemic-causing viruses by doctors who have been inoculated for over 100 years by the theory that microbes are deadly and only modern medications and vaccines will protect us from virus pandemics.

Virus Mania is a social disease of our highly developed society. To cure it will require conquering fear, fear being the deadliest contagious virus, most efficiently transmitted by the media.

--http://www.whale.to/a/virusmania.htm

The Virus, Infectious Disease, and Epidemic Fear Racket

In ***Virus Mania***, Claus Köhnlein shows that these alleged contagious viruses are, in fact, particles produced by the cells themselves as a consequence of certain stress factors such as drugs, as said by Dr Ryke Geerd Hamer, M.D. (emotional trauma) and the Pleomorphists (**see**: Infections & poisons Infection & nutrition), the original being Bechamp from over 130 years ago. That is how long this hoax has been running, by the likes of Rumsfeld, almost as long as the 200 year vaccine one. Avoid vaccines as that is the way they like to deliver the poisons or start an 'infectious' scare e.g. AIDS (Heb B vaccine), Spanish **Flu** (soldiers given 15 vaccines), Swine Flu 1976, Gulf War Syndrome (Anthrax vaccine). And if they gave a rat's ass about us they would be using the well proven (60 years and 1,200 medical citations) cure for all infections: Vitamin C.

But they can't do that as it would destroy the lucrative viral vaccine industry, with Allopathy Inc/Drug Industry following (and the government), as only medical politics keeps Nutritional Medicine from ousting Allopathic medicine.

Of course, apart from fuelling the gravy train known as vaccination and anti-virals like Tamiflu (and assorted disease promoting industries like the CDC), epidemics are a great way to hide industrial pollution (Toxic air), and a big red flag is the fact no mention is ever made of industrial pollution or toxicology (**see**: Jim West). A classic example being the 1953 UK 'epidemic'. Some of these media Fearmongers have more of a vested interest than most, e.g. John Oxford.

Ignore the real cause of 'viral' diseases:

1) Vaccinations
2) Toxic air

3) Poverty
4) Junk food
5) Pollution
6) Alcohol
7) Chemicals
8) Poor nutrition
9) Drugs
10) Poor Sanitation
11) Poisons
12) Smoking
13) Bacteria
14) Mold
15) Fungi
16) Stress
17) GMOs

Effective Medicine

1. Naturopathy
2. Natural Hygiene,
3. Homeopathy
4. Herbalism
5. Nutritional Medicine
6. Supplements

--http://www.whale.to/a/infectious_scares.html

The Allopathic Medicine Racket: Medical Mafia and Big Pharma

The Medical Monopoly Hides behind these names:

1) Orthodox

2) Modern
3) Scientific
4) Contemporary
5) Traditional
6) Conventional
7) Evidence/Science Based
8) School Medicine
9) Big Pharma
10) The Drug Trust
11) Modern Science
12) The Medical Profession
13) The Medical Industry
14) The Cancer & Aids Industry
15) Corporate Medicine
16) The CDC
17) The WHO

Allopathy Inc. is a C 19ert Church. Allopathic Medicine is mostly based around patentable drugs (pharmaceutical medicine), with radiation and surgery. Administered by the 'Medical Profession' who are all medical doctors. These medical doctors that will only use the drug company products are called Allopaths, as opposed to the ones who use alternative medicine (non-Allopathic), such as nutrients. It is run by the Medical Mafia. One of the best kept secrets is the Allopathic medical monopoly. The merger of State with Corporate power is called Fascism, so this is medical Fascism.

If you look into the use of nutrients, herbs and naturopathy (see: Herbs for cancer, Natural Healing & Nutritional Medicine) you will see that they are far more effective (cure all diseases in fact) than Allopathy (which can cure only bacterial infections), yet we can only get Allopathy on the NHS, a very simple expose of the real situation---monopoly medicine. Also see: The Vitamin C Conspiracy and The Cancer Conspiracy (hence Fascism) just for starters.

The whole enterprise is resting on the Vivisection hoax, with the yearly slaughter of 300 million (1993) animals (ref) (not to mention the massacre of the Sacred Yew trees through Taxol), and the Vaccination Hoax.

Allopathy is the leading cause of child death and disability in the first world (while third world children are given the mercury containing and other withdrawn vaccines), e.g. autism, and the leading cause of death ("*It is likely that over 50 million Americans have died prematurely due to Allopathy*") made worse by its 100 year + suppression of alternatives, true Disease Theory, and the cause of most diseases, while it C 19ertly promotes or turns a blind eye to Junk food, such as Bottle-feeding, Aspartame, MSG, and other poisons such as Fluoride and Mercury amalgam.

Imagine that instead of saying you were going to the *doctor*, you said you were going to see the ***Allopath***, like you do with Homeopathic or Naturopathic doctors. Think about that, and you will see why Allopathy is a non-word. Also see Nazi connections to Allopathy.

Allopathy is essentially an extortion scheme using a Protection Racket called The Fear of Disease. It has taken over from religion as a false God (see), and derives its power from Big Brother, it being his main source of income (C 19ert taxpayer robbery) and means of control, as the Church used to be in the old days. Big Pharma also meshes with Sex Inc.]

--http://www.whale.to/a/allopathy_h.html

Germ Theory Versus Pierre Jacques Antoine Béchamp

Pierre Jacques Antoine Béchamp (October 16, 1816 – April 15, 1908) was a French scientist now best known for breakthroughs in applied organic chemistry and for a bitter rivalry with Louis Pasteur.

Béchamp developed the Béchamp reduction, an inexpensive method to produce aniline dye, permitting William Henry Perkin to launch the synthetic-dye industry. Béchamp also synthesized the first organic arsenical drug, arsanilic acid, from which Paul Ehrlich later synthesized salvarsan, the first chemotherapeutic drug.

Béchamp's rivalry with Pasteur was initially for priority in attributing fermentation to microorganisms, later for attributing the silkworm disease pebrine to microorganisms, and eventually over the validity of germ theory. Béchamp also disputed cell theory.

Claiming disC 19ery that the "molecular granulations" in biological fluids were actually the elementary units of life, Béchamp named them microzymas—that is, "tiny enzymes"—and credited them with producing both enzymes and cells while "evolving" amid favorable conditions into multicellular organisms. Denying that bacteria could invade a healthy animal and cause disease, Béchamp claimed instead that unfavorable host and environmental conditions destabilize the host's native microzymas, whereupon they decompose host tissue by producing pathogenic bacteria.

While cell theory and germ theory gained widespread acceptance, granular theories became obscure. -Wikipedia

Béchamp's version, microzymian theory, has been retained by top Virologist as a more accurate explanation of disease than modern Germ Theory.

Quotes About Bechamp

Antoine Bechamp, from whose research Pasteur plagiarized whatever he thought was useful, came up with an interesting point of view that has never been refuted. Bechamp disC 19ered tiny organisms he called "microzymas" which are present in all things - animal, vegetable, and mineral, whether living or dead. Depending upon the condition of the host, these microzymas could

assume various forms. Bad bacteria and viruses were simply the forms assumed by the microzymas when there was a condition of disease. In a diseased body, the microzymas became pathological bacteria and viruses. In a healthy body, microzymas formed healthy cells. When a plant or animal died, the microzymas lived on. To this day, the whole theory of microzymas has never been disproved.

Later researchers like Naessens and Enderlein followed the same line of reasoning and developed their own systems of how these microzymas operate. Although their ideas were never proven false by opposing research, they were generally persecuted by mainstream medicine, which makes sense. Because without an enemy that can be identified and killed, what good is it to develop weapons? And developing weapons, that is, drugs, has been the agenda of the industry set up by Carnegie and Rockefeller even down to the present day, as we shall see. New drugs mean new research funding and government money and the need for prescriptions and for an entire profession to write those prescriptions.

"These microorganisms (germs) feed upon the poisonous material which they find in the sick organism and prepare it for excretion. These tiny organisms are derived from still tinier organisms called microzyma. These microzyma are present in the tissues and blood of all living organisms where they remain normally quiescent and harmless. When the welfare of the human body is threatened by the presence of potentially harmful material, a transmutation takes place. The microzyma changes into a bacterium or virus which immediately goes to work to rid the body of this harmful material. When the bacteria or viruses have completed their task of consuming the harmful material, they automatically revert to the microzyma stage”. --Bechamp.

Sourced:

Vaccination The "Hidden" Facts by Ian Sinclair

ACADEMIC RECORD

1) Master of Pharmacy
2) Doctor of Science

3) Doctor of Medicine
4) Professor of Medical Chemistry and Pharmacy at Montpellier
5) Fellow and Professor of Physics and Toxicology — Strasbourg Higher School of Pharmacy
6) Professor of Chemistry at Strasbourg
7) Professor of Biological Chemistry and Dean of Faculty of Medicine of Lille
8) Chevalier of the Legion of Honor — Commander of the Rose of Brazil etc., etc.

Professor Bechamp's name has been C 19ertly erased from medical history textbooks.

Germ Theory and Depopulation

I want to straighten out the thinking of many people who look at germs as the primary vehicle for reducing the global population. These are the people who continue to say, against all evidence, that the "pandemics" of the last few decades stemmed from deadly bio-engineered germs launched to kill massive numbers of people.

First and foremost, the "pandemics" were duds. West Nile, SARS, bird flu, swine flu. Even overblown estimates of swine flu deaths, worldwide, eventually settled in at about 20,000.

By comparison, according to the same organization that pegged the swine flu death total, the World Health Organization (WHO), annual deaths from ordinary non-pandemic seasonal flu range from 300,000 to 500,000.

Odd that swine flu is called a pandemic, while ordinary flu is ignored. Odd? Absurd.

In the spring of 2009, as documented by Peter Doshi in the BMJ, two very curious things happened at WHO: with only 20 confirmed cases of swine flu, that's 20, WHO declared swine flu a level-6 pandemic, which is the highest threat level possible; and at the same time, in Orwellian fashion, WHO revised its definition of "level-6 pandemic," so that it no longer required severe devastation and large numbers of deaths. WHO could declare a germ was a horrible global threat, regardless of whether it was causing any real harm.

If that does not raise red flags, nothing will. Swine flu was a PROPAGANDA OPERATION, plain and simple, aimed at scaring populations and driving them to get vaccines. That was the op. And it failed. In fact, the op was exposed (by yours truly and others) as a sham and a con. Millions of people online caught on. It was a devastating defeat for WHO, the CDC, and the medical cartel.

Let us go deeper. In general, so-called contagious diseases are caused, not by germs, but by IMMUNE SYSTEMS THAT ARE TOO WEAK TO FIGHT OFF THOSE GERMS.

When we put the cart and the horse in proper alignment, things become clear. I fully realize this isn't as sexy as talking about bio-engineered gene sequences in viruses, but the cart and horse must be understood.

Germs Are A C 19er Story

What do they C 19er up?

The fact that immune systems are the more basic target for depopulation and debilitation of populations.

In a recent piece, I went over this situation vis-a-vis Third World countries, where contaminated water supplies, lack of basic sanitation, overcrowding, severe malnutrition and starvation, stolen fertile land, and Western medicines and vaccines are the real vectors that attack and destroy the immune system on a chronic basis---thereby enabling MANY germs, OTHERWISE HARMLESS, to continually cause deadly infections.

But 30 years ago, it appeared that a new germ had come on the scene, a germ which was, in fact, attacking the immune system directly and lethally. HIV

In my first book, AIDS INC. (1988), I explored the research behind HIV. The bogus, incompetent, ego-driven, misapplied, intentionally false research. The research that made HIV the most feared germ in human history.

I showed there was absolutely no reason to believe that HIV was mounting any attack on immune systems. I showed that the tests for the presence of HIV

were completely unreliable and misleading, and the drugs to treat HIV were killers.

This was an important undertaking, because with HIV, the whole notion of the germ theory of disease had escalated to new heights. A single germ was being blamed for immune suppression, from New York to Kampala.

With more laypeople and researchers becoming aware of the centrality of the germ-conquering natural immune system, the medical cartel played a trump card:

It said it had disC 19ered a new germ that would crash the immune system.

It said: all your ideas about the immune system are useless. The immune system cannot "replace doctors and drugs" by warding off germs if it is being destroyed by HIV. You see? A single germ is more powerful than the whole immune system. The germ is the real problem. We win, you lose.

That was their play. That was their game. That was their lie. Actually, HIV wasn't destroying or harming a single immune system on the planet, lies work when you have a whole propaganda system at your disposal.

The cartel had to cut off other competing theories that could move to center stage. The most important of these theories would focus on the immune system and how to strengthen it naturally. This is an area in which the medical cartel has zero answers.

- This is why the medical cartel is at war with natural health, which does have answers for building immune systems. THIS is why the FDA, a rogue criminal agency, is relentlessly attacking nutritional supplements, which can improve immune function. THIS is why the Codex group is making war against natural health.
- This is why who and the CDC must continue to invent and promote fake pandemics "caused by germs." they are defending their turf by all means available.

This turf is founded on the central lie of germ-caused disease. The lie must be presented as truth. It must be told over, and over again, in larger terms, in more frightening terms.

We have this pandemic. We have that pandemic. We have another pandemic. Germs, germs, germs. Their propaganda.

Some years ago, I was invited to speak at a conference about my medical investigations. I talked about bird flu and SARS as phony epidemics. I spoke about the need to focus on the immune system and how to strengthen it. I noticed a preponderance of very fat people in the crowd. On their desks, they had full spreads of McDonalds and giant containers of Coke.

When the Q&A period came, they began peppering me with questions about all sorts of exotic and C 19ert bioweapons that might be in use and aimed at the population. I readily acknowledged that a few of these were out there. But I also stressed the importance of building strong immune systems.

My message began to get through but judging by the squeamish expressions on the faces of the attendees, it wasn't happy smiley message.

Is it possible to design various weapons that can sneak in under the immune system's radar? Yes. Does this mean there is no need to understand what the medical cartel is really doing, day after, year after year, as the bodies pile up? Does this mean one should forget about trying to create a stronger immune system, since it might not be useful against certain exotic strategies? No.

Do you want to know the primary medical weapon that can, in fact, sneak in under the radar of the immune system?

The weapon that is hidden in plain view:

IT IS VACCINES

I'm not talking about strange bio war-engineered vaccines planted with super-secret elements.

I'm talking about run-of-the-mill every-day vaccines that are used across the world.

Because they are injected directly into the body, they bypass a number of normal layers of the body's immune-defense system. They get into the bloodstream. Some of them cross the blood-brain barrier.

Now you are talking about a whole different scenario. This isn't germs floating in the air or inherently existing in the body. This is a medical artifact, based on completely false science, whose effects are considerable and powerful, precisely because the route is injection.

Germs are injected. Chemicals are injected. Contaminated debris is injected.

A conspiracy doesn't have to be extraordinarily arcane, complex, and super-secret to be devastating.

It can be, but it does not have to be.

Some people are so enamored of the arcane, complex, and super-secret that they do not care about the truth that is staring at them from across the table.

I'll tell you something arcane and complex: the psychology by which the bigger and bigger and bigger lies, told right out in the open, are swallowed or ignored. This is a REMARKABLY interesting field of study, and I've been studying it ever since I wrote AIDS INC. in 1988. I had to.

Speaking as a reporter, it's fascinating when you absolutely have the goods and deliver mind-boggling stories and revelations, when you think THIS IS IT, when you know this will torpedo the corrupt system down to its core...it's fascinating to watch the response of blank faces.

I wish this experience for all of you. It's tremendously instructive. It tells you so much more about mind control than all the hidden information about CIA MKULTRA. It tells you much about the human mind.

It's why I decided to devote a great deal of time to investigating what has come to be called The Matrix. Now THAT'S complex.

--Jon Rappoport

Bechamp and The Post-Antibiotic Age: Germ Theory

"When once you interfere with the order of nature, there is no knowing where the results will end." - Herbert Spencer

It was great while it lasted: the age of antibiotics. Sure, came and went in a hurry, though, didn't it? Left me with a few questions:

- How did antibiotics run their course already in just 50 years?
- How did we get so sick?
- Where does all the money go?
- Why aren't we making any progress?
- What's going to happen now?

These are the questions for which you can almost never get a straight answer. Unless you look beyond Newsweek, beyond the San Francisco Chronicle, beyond 20/20, or Ted Turner, beyond the media which year by year seem to cater to an ever-dwindling level of literacy and awareness...

Questions like these involve some famous people: Pasteur, Bechamp, Koch, Bernard, Carnegie, Rockefeller, Fleming, all of whom we will mention. But before we launch off into all that, let's turn back the clock for a moment and go back to 1350 A.D. Place: the European continent.

In less than two years' time, the bubonic plague wiped out half the population of Europe. Fleas bit rats and then bit man, but no one knew it. An estimated 25 million people died. Some individual cities had a mortality as high as 90%. Bodies were piled into carts and dragged away to be burned in common graves. It was a most grotesque way to die, bleeding and screaming and having one's organs liquefy. From infection to death took perhaps one week. Prior to that outbreak, bubonic plague had been absent for nearly 1000 years. Scholars of the day attributed the cause of the plague to evil spirits,

divine retribution, etc. All this time, even up to the present, other scientists have been asking the question: why did some die, and some survive? What made the difference? Today we know the answer.

Go forward now a few centuries to France in the 1870s. Three scientists were conducting experiments in the area of chemistry, particularly having to do with fermentation, yeast, and the new disC 19ery of little organisms called bacteria. All were involved in similar research but there was much competition and "borrowing" of disC 19eries, always with the undercurrent of politics and influence, as usual. The men were Louis Pasteur, Antoine Bechamp, and Robert Koch, a German. These individuals were not colleagues but worked independently. Each one knew that he was onto a whole new area of human disC 19ery, and the race was on to influence the medical world.

It was Pasteur who won the race of politics and influence. Today students memorize that Louis Pasteur "disC 19ered" the Germ Theory. Not only is this not accurate, and not only is the Germ Theory itself unsubstantiated even today, but Pasteur himself in one of the most quoted deathbed statements perhaps of all time, recanted the Theory and admitted that his rivals had been right, and that it was not the germ that caused the disease, but rather the environment in which the germ was found: "Bernard acail raison; le terrain c'est tout, le germe c'est rien."

The Germ Theory

What exactly was this Germ Theory? Very simply, the Germ Theory stated that there were separate diseases and that each disease was caused by a particular micro-organism. It was the job of science, then, to find the right drug or vaccine that would selectively kill off the offending bug without killing the patient.

That would be great, but nature rarely is so black and white about things, ever notice that? For one thing, bacteria and viruses tend to be "environment-specific." That is why some people get colds and others don't. That is why some survived the Bubonic Plague. That is also why some doctors and nurses seem to be immune to disease even though they're surrounded by it every day.

Deepak Chopra tells us of a study in which the influenza virus was isolated and implanted directly onto the mucous membranes of a group of subjects, with only 12% of them getting the flu. (Quantum Healing)

The Germ Theory has as many holes as a Swiss cheese, and it is likely that Pasteur knew it. But a little research shows us that Pasteur had a gift for PR. He rarely let his research keep him away from an opportunity to address royalty or medical society in the most prestigious university settings. He was quoted and published and offered practically every honorary title and chair in Europe. The records however not only cast suspicion but seem to establish fairly clearly that Pasteur "borrowed" the research for some of his most famous disC 19eries, and then capitalized on the celebrity of being there first.

What's the Big Secret?

Before he died, Pasteur instructed his family not to release some 10,000 pages of lab notes after his death. Not until 1975, after the death of his grandson, were these "secret" notes finally made public. An historian from Princeton, Professor Geison made a thorough study of the lab notes. He presented his findings in an address to The American Association for the Advancement of Science in Boston in 1993. Dr. Geison's conclusions: Pasteur published much fraudulent data and was guilty of many counts of "scientific misconduct," violating rules of medicine, science, and ethics.

Like Koch, Pasteur was very motivated by money. In the race for a vaccine for anthrax, for example, not only did Pasteur not test it on animals before using humans; it was also established that Pasteur actually stole the formula from a colleague named Toussaint. Unable to prove his claim at the time, Toussaint died a few months later of a nervous breakdown. (Hume)

Hume

There was a book published in 1932 that is still in print today: Bechamp or Pasteur? This book was written by E. Douglas Hume, who it turns out was actually a woman who had to disguise her name as male to get the book published. Hume chronicles a contemporary of Pasteur, Antoine Bechamp, the

most respected researcher, and teacher in France at the time, department head at the University at Lille.

Bechamp was too busy to be bothered with conventions and awards and politics. He was a professor and a researcher, and that took every moment of his time until his death at 93. It was Bechamp's view that it was not the bug that caused disease, but rather the condition in which bugs lived. Disease happens when an imbalance causes some of the more pathological that is, bad, bacteria to take over. What causes that? Low resistance, weak immune system. Seems like such a simple idea, but that is really the foundation of the whole controversy all along. In the end, everyone, even Pasteur, agreed that bugs - bacteria and viruses - do not alone cause disease.

A little research unC 19ers the following amazing possibilities about Pasteur, which the reader is encouraged to further investigate:

Pasteur had no training or credentials in either medicine or physiology; he was a chemist

Pasteur highly likely created the disease known as "hydrophobia," rather than found a cure for it.

Pasteur initiated the practice of vivisection with horrific animal experiments. Hundreds of thousands of laboratory animals have been needlessly killed by atrocious experiments in the name of "science," not only at Pasteurian Institutes, but pervasively throughout the entire empire of medical research laboratories worldwide, even to the present time.

Rather than protect the human race from disease, Pasteur was solely responsible for the deaths of hundreds of people who were inoculated with unproven vaccines and injections, and indirectly for thousands more in whom disease was introduced by the administration of unproven Pasteurian procedures.

Pasteur may be seen more as a merchant than a scientist, with his frequent reporting of false test findings and data, which had two designs: self-promotion

and profiteering from the sale of drugs and vaccines that were often made mandatory by legislators.

Pasteurian treatment for a disease he did not even have actually killed Alexander, the King of Greece.

Pasteur did not work on naturally diseased subjects, but instead introduced the idea of inducing sickness by giving morbid (diseased) injections into healthy subjects.

As far as his Germ Theory goes, there was much opposition to it among many researchers of his own time. In a lecture given in London on 25 May 1911, M.L. Leverson, MD stated:

"The entire fabric of the germ theory of disease rests upon assumptions which not only have not been proved, but which are incapable of proof, and many of them can be proved to be the reverse of truth. The basic one of these unproven assumptions, wholly due to Pasteur, is the hypothesis that all the so-called infectious and contagious disorders are caused by germs."

Also, from the top medical journal Lancet, 29 Mar 1909, we find:

"Koch's Postulates are rarely, if ever, complied with."

The disC 19erer of the cell theory, Rudolf Virchow, with respect to the Germ Theory, commented simply:

"Germs seek their natural habitat - diseased tissue - rather than being the cause of diseased tissue."- Bieler, p 40

Virchow felt that the presence of germs identified the tissue as diseased but was not the cause of disease. A weakened or diseased tissue may be a target area for micro-organisms, a hospitable environment in which they can set up shop. But that's quite different from germs having caused the weakened state.

The same idea was graphically shown to Bechamp one day when an amputated arm was brought into his laboratory. As a result of a violent blow to

a patient's elbow, gangrene had set in within eight hours, and amputation was the only option. Bechamp immediately began to examine the severed limb using the microscope. To his amazement he found no bacteria in the gangrenous limb. After a few hours, bacteria began to appear, but initially there were none. Bechamp's associate, Professor Estor, thereupon remarked "Bacteria cannot be the cause of gangrene; they are the effects of it." (Hume p 134)

Postulate This

Robert Koch was racing Pasteur to find the cause of a disease called anthrax, from which great numbers of cattle in Europe were dying. Taking blood from the diseased cattle and isolating bacteria from it, Koch then injected mice with the bacteria. When the mice died, Koch then cultured blood from them and compared it to the original bacteria form the cattle. He developed procedures and his Postulates are still memorized by medical students the world over as the foundation of the Germ Theory:

1. The organism must be present in every case
2. Must be isolated
3. Must cause the disease in a healthy host
4. Must be isolated again

Each postulate has been disproven, then and now, but that has not cheated them of their place as basic tenets in the Germ Theory religion. Both Koch's and Pasteur's vaccines for anthrax were colossal failures, with thousands of sheep killed all over Europe as part of the "experiment," especially in Italy and Germany. It is also interesting to note that both Koch and Pasteur did everything possible to alter and C 19er up the results of these failures. (Hume)

Oops!

Koch made the first vaccine for tuberculosis, employing these same Postulates. He called the vaccine tuberculin. In Berlin alone, 2000 patients were

inoculated with tuberculin. Unfortunately, they died at a higher rate than TB patients who hadn't been treated at all.

Tuberculin simply did not work. More distressing for Koch was the admission by the Prussian government that they'd made an exclusive agreement with Koch to sell the remedy and divide the profits. Not only was this a political disaster for the Prussian government and for Koch himself, but it was an embarrassment for the cause of scientific medicine when all the prestige of the scientific method suddenly suffered this blow. Koch never reC 19ered his credibility and is remembered today only for his "Postulates." But Koch helped set the stage for the marriage of science and marketing, for which divorce does not appear likely any time soon, especially at present.

At the turn of the century, tuberculosis was the leading cause of death in America. (Garrett)

Another Theory

Antoine Bechamp, from whose research Pasteur plagiarized whatever he thought was useful, came up with an interesting point of view that has never been refuted. Bechamp disC 19ered tiny organisms he called "microzymas" which are present in all things - animal, vegetable, and mineral, whether living or dead. Depending upon the condition of the host, these microzymas could assume various forms. Bad bacteria and viruses were simply the forms assumed by the microzymas when there was a condition of disease. In a diseased body, the microzymas became pathological bacteria and viruses. In a healthy body, microzymas formed healthy cells. When a plant or animal died, the microzymas lived on. To this day, the whole theory of microzymas has never been disproved.

Later researchers like Naessens and Enderlein followed the same line of reasoning and developed their own systems of how these microzymas operate. Although their ideas were never proven false by opposing research, they were generally persecuted by mainstream medicine, which makes sense. Because without an enemy that can be identified and killed, what good is it to develop weapons? And developing weapons, that is, drugs, has been the agenda of the

industry set up by Carnegie and Rockefeller even down to the present day, as we shall see. New drugs mean new research funding and government money and the need for prescriptions and for an entire profession to write those prescriptions.

Pasteur Won

How did Pasteur's ideas become the foundation of organized medicine? Politics. Pharmaceutical economics.

Early in his career, Pasteur was decorated by the Emperor Napoleon. His position as a scientist was thereby secured, even though he was only a chemist and had no credentials at all in medicine or physiology. Scientists in both France and Germany at that time were grappling with mankind's first look at fundamental questions about the nature of living matter itself:

1) What makes something alive or dead?
2) Where does that force come from?
3) Why do things rot, ferment, or decompose?
4) Is there something in the air, or something inside the organism that has these effects?
5) What effects can manmade chemicals have?

For the first time in history, things were coming into focus. DisC 19eries were being made about fundamental issues, but in a piecemeal fashion. It was perfect timing for an opportunist to take advantage of the general uncertainty and lack of understanding and to claim that he understood all the issues involved, and furthermore had thought of them first. Pasteur was noted for his habit of playing both sides of the fence on issues he didn't understand, and then later, to quote the parts of his earlier writing that supported the later finding, always with the claim that he had been there first. Only the scientists understood the complexities of these emerging ideas. The royal court and the press just knew that something was going on, and though they didn't know what, were going to act as though they did. And for them, a chameleon like Pasteur was the perfect front man.

Politics never changes. The same type of thinking that imprisoned Galileo long ago for disC 19ering that the earth went around the sun, the rulers' eternal attempt to control the minds of their subjects, these are the forces that cast Pasteur, an ambitious opportunist, into a position he may not have deserved - the supposed Trailblazer in the science of modern biomedicine.

Funny how things often do not really get "disC 19ered" until the commercial aspects of that disC 19ery have been worked out.

Howard Hencke, in his 1995 book The Germ Theory: A Deliberate Aberration, notes that it was critical for the new medical industry.

"... to indoctrinate the public in the Western world with the belief that the salvation from all, especially physical ailments, lay outside the individual's system and responsibility, because it was caused by external factors...and that chemical remedies (drugs) will keep him free from disease, independent of his own vigilant responsibility."

We are talking about marketing here, yes?

The author of the long-suppressed work Pasteur or Bechamp? states:

"Had it not been for the mass selling of vaccines, Pasteur's germ theory of disease would have collapsed into obscurity." - E. Douglas Hume

Some 17 years before Pasteur, the most famous nurse in history, Florence Nightingale, put it like this:

"Diseases are not individuals arranged in classes like cats and dogs, but conditions growing out of one another. The specific disease is the grand refuge of the weak, uncultured, unstable minds, such as now rule in the medical profession. There are no specific diseases; there are specific disease conditions." --F.N. 1860

Sound familiar?

A Few Snags

Actually, it was more than a few, as even the most cursory investigation into vaccination demonstrates. From the beginning, the whole idea of piercing the skin with a needle for any reason was suspect, let alone introducing new proteins and agents into what was supposed to be an inviolable environment: the circulatory system. Injections are a total violation of nature.

Normally nothing is introduced into the bloodstream without going through the laboratory of the entire digestive system. That is how nature protects the blood from external intrusions. Here are just a few of the hundreds of researchers opposing inoculation:

"The most serious disorders may be provoked by the injection of living organisms into the blood...into a medium not intended for them may provoke redoubtable manifestations of the gravest morbid phenomena."- Bechamp

A medical doctor reporting from the battlefields of South Africa during the Boer War in the early part of this century, Walter Hadwen, MD, in his book Microbes and War notes that the war itself killed 86,000 men. With a 100% inoculation rate, there were an additional 96,000 casualties from disease alone!

In 1915, another medical doctor wrote an article for the top British medical journal Lancet. Dr. Montais studied 21 cases of tetanus, each of whom had received Pasteurian inoculation. The conclusion of the article, which appeared in the 23 Oct 1915 issue, was that in every case, the tetanus had been caused by the inoculation. Dr. Montais said that "Pasteur had created a new form of disease."

We should understand that it was Pasteur who began the fashion of studying artificial disease conditions: "inducing sickness by morbid injections in human and animal subjects, instead of studying naturally diseased subjects."

Pasteur began the practice of vivisection and horrific animal experiments, which has never been proven to have any value. Why not? In the natural state, animals simply have different diseases from humans. This one error has led us down a costly and finally fruitless path. How can we hope to cure human disease by giving animals diseases they would never have gotten in nature, then pretending that such diseases are the same ones we get, and then seeing which

drugs C 19er up the animal's symptoms? The we illogically conclude that those same drugs will have the same effect in humans! Idiotic as that sounds, this may be a pretty fair description of how many prescription drugs have found their way to market during the past century.

Without going on for pages and pages with data that substantiate the above ideas, suffice it to say that Pasteurian methods may not have been quite the success we have always been taught that they were. The reader is referred to the chapter on Vaccinations, and to Hans Ruesch's Naked Empress.

So with most of the major researchers eventually coming around to the same conclusion, how is it that on the threshold of the 21st century, organized medicine in this country still acts as though the Germ Theory is carved in stone and all policy proceeds from this premise? And most people still believe it?

The answer to that is out there too and can be gotten to with just a little more patience.

Roll forward now to the 1880s and 1890s. The Industrial Revolution, the age of coal, of oil, of electricity, of machines, of railroads and automobiles. Two figures towered over this era, wielding more power over science, industry, finance, and politics than possibly anyone else in history. Of course, we're now speaking of Andrew Carnegie and J.D. Rockefeller.

The control of Carnegie and Rockefeller over most aspects of American life is something to marvel at and appreciate, even extending to the present day. Change was taking place faster than the politicians could control it, and for once in our history, control was in the private sector. Without going into a long political harangue, I just want to touch on one aspect of the way that power was expressed - the rise of organized medicine.

Before 1880, most medicine consisted of folk remedies, basic herbs, and crude surgery and dentistry. For centuries, there had not been much radical change in the area of medicine. Superstition was as much a part of medicine as the actual remedies themselves. The use of leeches and bleeding was still common, the reason being to "let out the bad blood,'" which was in the same category with getting rid of evil spirits. Even drilling holes in the skull - the art

of trephination - which had been around since the time of the Pharaohs, was still done.

In Renaissance Europe, barbers and surgeons actually were the same profession, combining the services of shaving, pulling teeth and bloodletting. The origin of the red and white striped barber-pole is well-known: an enterprising barber/surgeon, having just bled a famous nobleman, proudly displayed a bloody white towel used in the procedure by wrapping it around a pole outside his establishment. In the 1700s, King Edward IV of England instituted a corporation of "barber-chirurgiens" who performed the above services. Not until 1800 did King George II separate barbers and surgeons into two separate professions.

Among many other things, Carnegie and Rockefeller controlled the oil and coal industries. By 1900, they became aware that these industries were producing mountains of waste year by year. An original idea was presented: what if these chemical waste materials could somehow be turned to profit? Capital idea, but how? Medicines, that is how. But medicines like the world has never seen. Medicines made from chemicals. Pharmaceuticals.

The Creation of Credibility

Brilliant idea. But how could the people be made to accept such a strange notion? That was the problem. They just took natural cures and occasionally consulted the country or local doctor for something "serious." The way to gain general acceptance of the new medicines soon became obvious: standardize the education, training, and credentialing of medical doctors and raise their economic status to a level where they would follow policy. And the policy would come from above.

About 1904 Andrew Carnegie noticed that the workers in his factories actually made more money than most medical doctors. Consulting with the president of MIT, Henry Pritchett, they set up the Carnegie Foundation with $10 million. Its original purpose was to provide a pension fund for retiring professors. But soon a new application emerged: control of education. The

name was changed to the Carnegie Foundation for the Advancement of Teaching, and Pritchett expanded its original purpose, now calling it:

"a great agency devoted to strengthening American education through scientific inquiry and policy studies."

Any time billionaires tell you they are going to devote themselves to something for you, that's usually the time to check your wallet. Ever notice that?

The Foundation became immensely successful. Control of educational standards came about in this way: in order to qualify for the new pension system, a participating institution had to meet standards set by the Foundation. In the first year, only 52 of the 421 colleges who applied were accepted. The Foundation soon took on a life of its own.

Abraham Flexner

A nonphysician teacher, was hired by the Carnegie Foundation to travel throughout the country and "observe" medical education. His landmark study, known as the Flexner Report, was published in 1910. Upon his recommendations, the Foundation branched out from being merely a pension plan for professors to an entirely new area: research funding. Schools which met Flexner's, i.e., the Foundation's, standards were awarded research funds and endowments. Those who did not got nothing. In this way the giants of industry came to dictate the type of medical care that would flourish in America. Traditional, natural methods of healing were passed over, in favor of the more "scientific" approach, which coincidentally meant those schools with the likelihood of disseminating the products of the newborn pharmaceutical industry. The big universities in the medical hierarchy that rule today were aligned with the Carnegie Foundation at that time:

1. Case Western Reserve
2. Johns Hopkins
3. Carnegie Institute of Chicago
4. University of Chicago
5. Harvard School of Medicine

6. University of North Carolina

Not to be outdone by the Carnegie Foundation, The Rockefeller Foundation also came into ascendancy at this time. Again, employing the direction of Abraham Flexner, the Rockefeller Foundation developed national standards for medical schools that were seeking "philanthropic" support. Good word. In 1904 there were 5747 medical doctors. Only 15 years later, after the Flexner Report, by 1919, there were only 2658. In that same 15-year period, the number of medical schools went from 162 to 81. (Lisa p 26) The cut had been made - Rockefeller was screening who was going to play ball from who was not.

Schools had to be connected to a large university. Universities had to be linked with clinical departments with laboratories and a university hospital. Using Rockefeller Funds, Flexner was able to develop a small group of elite medical schools that were clinically oriented. They already had the raw materials for the new drugs. What was lacking was an academic powerbase to legitimize their development and general use.

The infrastructure for education, funding, research, and the organization of medicine that persists today was created in a few short years. Ever wonder how simple folk medicine which had been around for centuries was chucked out the window so fast? Set up under the guidance and specifications of two of the biggest economic forces in history, Carnegie and Rockefeller, organized medicine became an industry, with its focus on market growth. An industry concerned with disease is not about to abolish itself by curing the diseased, now is it? This is why all these years effective inexpensive non-pharmaceutical remedies have been systematically suppressed. It's simply good business.

Against this backdrop, the flailing Germ Theory was revived and trotted back out for a SECOND RUN

The fact that it had been repudiated by its founder and most of his contemporaries was no longer mentioned in circles who expected next year's funding. The Germ Theory fit well with the new market-oriented paradigm of

medicine: if bad bugs are out there causing diseases, we better find drugs to kill them. It was a natural, a marriage of expediency, like Bill and Hillary.

Up into the 1920s, the burgeoning medical industry was gaining strength. It was aided by the declining incidence of infectious diseases due to improved sanitation, for which medicine took credit. That is an entire story in itself, and a good starting point would be The Sanctity of Human Blood.

The politics of medicine was becoming stronger year by year, as new institutions were built, and funding was doled out for those research projects that had the best potential for future market value. The worldwide flu epidemic of 1918 that killed millions proved that the new "scientific" approach had a lot to learn about disease prevention. There was simply no cure, as the virus tore through the world's population.

The still-unproven Germ Theory came to be accepted as policy largely because any opposition to it had little chance of getting published. A small group of scientists, however, aware that the work of Bechamp was a much more reasonable view of physical reality, continued to develop research in a direction other than germs as the cause of disease. "Science" was off and running, the thoroughbred of the new drug market, but the scientific method had been left in the dust. The Germ Theory was enshrined as the underlying dogma of the new Religion. J.H. Tilden, MD, among others, was not going to church services, apparently:

"...doctors fight the imaginary foe without ceasing. The people are so saturated with the idea that disease must be fought to a finish that they are not satisfied with conservative treatment. Something must be done, even if they pay for it with their lives, as tens of thousands do every year. This willingness to die on the altar of medical superstition is one very great reason why no real improvement is made in fundamental medical science." - Toxemia Explained 1926

1926? Sounds like 2001. More Deja Vu.

Penicillin

In 1928, however, the Germ Theory got a power boost that has lasted almost to the present day. Dr. Alexander Fleming, a British scientist, accidentally disC 19ered that his cultures were being destroyed by a certain mold. For the next 14 years, scientists in England and America were successful in isolating and testing penicillin, in secret. However, in 1942 a fire at The Cocoanut Grove, Boston's oldest nightclub, killed and injured hundreds of people. Penicillin was rushed to Boston in time to prevent infection from burns in hundreds of patients. The news exploded, and the race to mass-produce penicillin, the Wonder Drug, was on. By 1944, all American military requirements for penicillin could be met. Merck to the rescue.

This one event, the disC 19ery of penicillin, did more to bring credibility to organized medicine than probably anything else in its history. To be able to prevent infection was certainly a miraculous and wonderful power. Thousands and thousands of people had died from infection down through the ages. Finally, here was proof positive of the correctness of the Germ Theory: these patients had died from bad bacteria, and now if only the bacteria were killed with penicillin, the patients would live.

Once again, nature was to show that she does not deal in black and white. In fact,

Mother Nature Always Bats Last

In his early research to formulate penicillin, Sir Alexander Fleming knew very well about the way living things could change or adapt when stressful substances were added. He knew, perhaps better than anyone, the dangers of resistance from overuse of penicillin, and warned against that overuse from the very beginning, as expressed in an interview Fleming gave to the New York Times in 1945:

"The greatest possibility of evil in self-medication is the use of too-small doses, so that instead of clearing up infection the microbes are educated to resist penicillin..."

Think of it this way: the oldest living things on earth are bacteria and viruses. They have been around for billions of years. They have persisted

through myriads of changeful environments - hot, cold, wet, dry, with oxygen, without oxygen, earthquakes, volcanoes, glaciers - you name it. They're still around. Thousands of species of plants and animals have come and gone because they couldn't adapt. So it's pretty safe to say that on this planet, the masters of adapting are bacteria and viruses.

Now suddenly in the 1940s, we introduce a new substance into the human population: penicillin, a substance which kills all bacteria. Do you think bacteria might have run into some other stresses in the past 10 billion years? Probably have. How did they survive? They changed - doctors say 'mutated.' The ones that mutated survived; the rest died.

Even from the very beginning of the Antibiotic Age in the 1940s, doctors noticed the signs of MUTATION

Exposed to antibiotics, if bacteria can change and survive, they are said to be drug resistant. Superbugs.

Since the 1940s, many antibiotics have been developed until today there are about 160 types. The problem is that most are just slightly different versions of a few main types. And resistance to those main types has increased year by year.

Drug resistance is today one of the leading causes of deaths in the U.S.: More than 70 thousand patients die each year from it, according to the National Institutes of Health.(Garrett) These patients acquired the infection while they were in a hospital being treated for something else, according to the May 1997 documentary The Coming Plague. No known antibiotics can help these patients, and they die.

Increased mortality from infectious disease is on everyone's mind. A 1992 study by the CDC's Institute of Medicine showed that mortality from infectious disease has risen 22% worldwide from 1980-1992. (Slavkin, p108)

Here's a good example of drug resistance:

- In 1946, about 88% of Staphylococcus infections could be cured by penicillin.

- By 1950, only 61% of staph infections could be killed by penicillin
- In 1982, fewer than 10% of staph cases could be cured by penicillin.
- Today it is less than 5%.

The Plague Makers

In the 1960s, doctors switched the resistant staph patients to another antibiotic called methecillin. That worked for a while, but not for long. By 1992, at least 40% of these staphylococcus infections were resistant to methecillin, according to the New England Journal of Medicine, 28 Apr 94.

By 1993, only one sure fire Staphylococcus killer remained: Vancomycin was the big gun. However today that is no longer true. Today there are many strains of staphylococcus that are resistant to vancomycin. That means also resistant to penicillin and to methecillin. What is left? Nothing. Out of drugs.

Let us talk strep. Many of the resistant Streptococcus infections have made headlines in the past few years if the patients die a particularly gruesome death. Examples of this are stories of the "flesh-eating disease" which appear from time to time in the news. This is a strain of Group A streptococcus that is resistant to all antibiotics and can attack flesh, muscles, and organs. Now we all know that newspapers are generally not reliable sources of information because they tend to twist facts and over dramatize things and create crises in order to sell more papers. So things have not yet reached the state of affairs that we saw in the movie "Outbreak" with Dustin Hoffman. But many credible medical authorities have been quoted as saying that it's no longer a question of if a scenario like the Ebola epidemic portrayed in that movie could happen.

Rather it is a question of when.

1) Today 30% of Strep pneumoniae are resistant to penicillin, once the drug of choice with almost 100% results.
2) Today 30% of gonorrhea cases are resistant to both penicillin and tetracycline, which ten years ago was almost 100% effective. The CDC no longer recommends these two drugs for gonorrhea.

Fred Tenover, PhD of the Centers for Disease Control in Atlanta has said:

"We even have some strains [of streptococcus] now, although not all, that are resistant essentially to all of our clinically useful antibiotics."

The Superbugs

How serious is this problem of resistant bacteria? I guess death is a fairly serious outcome: 70,000 Americans are dying annually from bacterial infections they caught in the hospital, which no antibiotics could cure. According to the New England Journal of Medicine, Apr 94, of the 40 million patients hospitalized every year,2 million acquire infections after they get to the hospital. That's a one in 20 chance. As many as 60% of those 2 million infections involve antibiotic-resistant bacteria.

In some ICUs, there can be as high as a 70% chance of nosocomial infection! Nosocomial means acquired IN the hospital.

Tuberculosis

Let us look at TB for a moment. At the turn of the century, tuberculosis was the leading cause of death in the U.S. Then drugs were found that controlled TB for several decades. Recently however, there is no more control, because of the increase in the number of what doctors call MDR TB. That stands for multiple drug-resistant TB. When the immune system becomes suppressed, by junk food, prescription drugs, bad lifestyle, etc., mutant strains of TB are encouraged. That means resistant to one or more of the 5 drugs used to treat TB. The two main TB drugs are isoniazid and rifampin. In New York City by 1991, 42% of new TB patients were resistant to one drug, and 60% of relapses were resistant to them both. (Garrett, p521)

Many strains of TB are resistant to all 5 drugs and that percentage is growing steadily. Such cases are generally fatal, according to the World Health Organization. The WHO is predicting that in the next decade, world deaths from TB will increase from 3 million to 30 million! (Slavkin, p 111)

Doctors have actually gone on record saying that they personally would not venture into certain inner-city areas of New York City for any amount of money because of the danger of TB infection. (Lindsay Williams)

TB is a mycobacterium . Mycobacteria can survive in tissues for years, in a latent state, waiting for an opportunity such as a depressed immune system to become active and multiply.

So, what are most doctors doing about this situation of antibiotic resistance? They are in a very tough position, that is certain. Because of the control of information, most of the population today is unaware of the extent of drug resistance in this country. Even if they encounter a doctor who is cautious enough to tell them that perhaps they or their child do not need an antibiotic at the first sniffle, patients will often go to another doctor to get the antibiotic. So usually the physician will just come across: some recent studies have shown 10 out of 10 doctors will simply prescribe an antibiotic for minor colds, with no culture. It is astounding to learn that the average child of nine in this country has already had 17 runs of antibiotics in his lifetime! Why is that a problem?

The word is attenuation. Attenuation means that the bacteria were not killed; only half-killed. There are two reasons why this may have happened:

1. Most people stop taking the antibiotic as soon as they feel better. Isn't that true? They think they are fine, but what they just did was allow some bacteria to survive in a mutated form which is now resistant to the antibiotic they just took. Which means that next time the drug will not work

2. The bacteria mutated and survived the full course of antibiotics.

Just in Case

Here is another interesting word: prophylactic. We are not talking about birth control here. This is another sense of the word: if you have a cold, it is usually virus. So why do they give you antibiotics, which only kill bacteria? The word is "prophylactic"; we are going to give you a prophylactic dose of antibiotics. That means just in case you develop a "secondary" bacterial infection as a "complication" of the viral infection. Is that likely? Not very. The problem is that antibiotics are not M&Ms. They are powerful drugs which kill all your body's bacteria every time you take them. This is what is known as a Side Effect.

Leave Those Kids Alone

It starts almost at birth - you know, the ear infection thing. Otitis media, they call it. At the slightest redness around the ear, or the slightest little sniffle, any good mother will drag her baby into any good doctor for a checkup, right? Prescription? Antibiotics. Yes ma'am, we will kill those bad bugs before they ever get a chance to get started.

Antibiotics are for what? That is right - bacteria. But according to the NEJM, 28 Jan 99, at least 41% of otitis media is caused by virus. But they get antibiotics anyway, as often as not because the parents insist on getting them. And that is for the cases which actually are otitis media, not even counting all the rashes, allergies, or little traumas which are misdiagnosed as otitis media. Drug of choice: amoxicillin, even though doctors have known since 1991 that kids who take amoxicillin for simple otitis media have a 2-6 times greater chance of recurring infection than kids who do not. (JAMA, 18 Dec 1991)

The whole scene is way out of control, and the real losers are the kids. Childhood is their one chance to prepare their own natural defenses for the environment they will live in their whole lives. Every time a child takes antibiotics unnecessarily, at least three things happen:

- He gets better
- His immune system gets weaker - recurrent infections likely
- Those same antibiotics will not work next time, because only the bugs that survived will stick around

Almost 100% of the time, the child would have reC 19ered anyway, without drugs, just like they did for all those centuries before 1940. Kids are supposed to be sick sometimes, just like trees are supposed to be in storms. That is how they build strength. The over drugged, overprotected, artificially raised American kids are among the sickest, most allergic, most asthmatic, and most overweight children in the civilized world.

Healthy kids do not get sick. And it starts with the infant's immune system being unnecessarily weakened by inappropriate antibiotics from over solicitous parents and from doctors rightfully fearful of litigation and from drug companies hungry for a profit. Yes, yes, we know all about the dangers of spinal meningitis. But let us look at the natural incidence of meningitis in the un drugged, unvaccinated population. Miniscule, compared with the prodigious amount of actual immune system detriment which continues to be wrought by the excessive and inappropriate use of antibiotics.

Leave Those Kids Alone!

What is wrong with killing all my body's bacteria a few times a year when it's not particularly necessary?

Probiotics, that is what. Huh? Probiotics. Good bacteria. There are some 300 types of good bacteria at work in the colon which are necessary for many life functions, including complete digestion, absorption of vitamins and nutrients, and keeping the numbers of potentially pathological bacteria in check. Antibiotics kill all of them. It may take weeks or months for the body to rebuild its normal bacteria, which are called flora. This makes for incomplete digestion, also known as putrefaction, rancidity, or rotting of intestinal contents. Like John Wayne. Autopsy showed 44 pounds of undigested food in his intestines when he died! Think how heavy that would feel all those years. Guess nobody ever told The Duke about probiotics because he sure didn't have any.

Another problem with killing all the body's bacteria is that it is no longer possible. The pervasiveness of antibiotics through the human race by pills, food, and the animals we eat has promoted the survival of mutant (resistant) bacteria. Scientists have now made the amazing disC 19ery of finding antibiotic-resistant bacteria in the bodies of African tribesmen who live in total isolation from 'civilization,' with no access to drugs whatsoever! (Garrett) The point is, in 50 years, virtually everyone has developed some degree of immunity to antibiotics, directly or indirectly. The mutant strains are now normal flora. So, the more we now take "broad spectrum" antibiotics, the more we destroy the old non-resistant strains. What is left? The mutants.

Most medical authorities in the National Institutes of Health, the Centers for Disease Control, and the World Health Organization agree on one idea: antibiotic resistance will be the #1 health challenge of the 21st century. That will be the area in which we will see the greatest increase in the death rate: infections with no cure.

One hidden source of antibiotics is FOOD. Half the antibiotics produced in this country, which totals 50 million pounds per annum, according to federal statistics, are given to animals like poultry and cattle. 80% of animal antibiotics are given to promote growth, not health. (Levy, p140) Antibiotics are also used extensively on fruit trees and other plants, and even in fish hatcheries. Food processing does not destroy the antibiotics. When we take them in with the food, many of these animal antibiotics are still strong enough to have an effect on our body's bacteria. This further complicates the problem of resistance. Today people may be resistant to antibiotics they never even got from the doctor.

The animal antibiotics are getting stronger all the time. According to the Journal of the South American Veterinary Association, 1996, a recent antibiotic called salinomycin was given to a herd of cattle. The drug killed 10% of the cattle from heart failure!

Even the FDA has known about the spillover of antibiotics from animals to humans for a long time. As far back as 1976, FDA Commissioner Donald Kennedy was publicly campaigning to ban antibiotics from animal feed. (New Eng J Med, 9 Sep 1976) Lobbying from the drug companies won out, and high dosages in livestock continue to the present time.

The Big Boys

Antibiotics is a $23 billion/year industry in the U.S. Its overall purpose is not, nor ever was, health. Its purpose is market growth. As an industry, it is a victim of its own success. Stuart Levy, MD writes that having taken antibiotics as though they were M&Ms for so many years has "caused a destruction of the armor of antibiotic, what I call destroying the miracle."

Now maybe you're saying, oh don't worry about drug resistance - they'll come up with something new. Think again.

Nothing responds to change like a market growth industry. The drug companies know better than anyone about the advent of the Post-Antibiotic Era.

An article in the journal Clinical Infectious Disease, 1997 Supplement, stated that:

"...few new antibiotics are in the development pipeline, and indeed no novel class of antibiotics has been introduced into medical practice in more than 20 years. All recently introduced antibiotic compounds are permutations (improved versions) of pre-existing compounds."

Two of the major limitations ... are the high cost - about $300 million per new chemical entity - and the observation that many of the larger multinational companies have actually decreased their activities or even ceased to invest in the disC 19ery of new antibiotics."

What a surprise. So much for selfless dedication to humanity. Thanks a lot, guys.

Jackpot!

Want to talk about money? Here is a chart of U.S. hospital purchases of antibiotics, published in Jeffrey Fisher's book The Plague Maker.

1. 1962 - $94,000,000
2. 1971 - $218,000,000
3. 1991 - $3,000,000,000
4. 1997 - $8,000,000,000

Any questions?

Whose Fault Is It?

In 1981, when James Curran of the CDC was being ignored by his superiors about the coming AIDS epidemic, Mark Lappe wrote a book called Germs That Won't Die, in which he explained antibiotic resistance. A classic paragraph on antibiotics from Lappe's book, quoted by Laurie Garrett, is this one:

"Unfortunately, we played a trick on the natural world by seizing control of these chemicals, making them more perfect in a way that has changed the whole microbial constitution of the developing countries. We have organisms now proliferating that never existed before in nature. We have selected them. We have organisms that probably caused a tenth of a percent of human diseases in the past that now cause twenty, thirty percent of the disease that we're seeing. We have changed the whole face of the earth by the use of antibiotics."

A Great Gift: Misuse, Overuse, Abuse

You can make all sorts of excuses, but here is the way it looks to many researchers: Mankind took this incredibly fortuitous gift - antibiotics - and let it be egregiously overprescribed and misused, for profit. And now we are down this road we can't come back from. Antibiotics have always had, and still have, only one proper application: the life-threatening situation. Not colds, not sniffles, not just-in-case anything. A life-threatening situation. Period. We screwed up.

The Party's Almost Over

Antibiotics really were a miracle drug and they really did save thousands of lives. But that time is coming to an end. The 1990s have brought a resurgence of bacterial and viral diseases, after almost 50 years of complete control over infectious diseases, according to the Apr 94 New England Journal of Medicine. If dissemination of antibiotics had been controlled by scientists instead of by drug reps and doctors and HMO execs, perhaps the epidemic of resistance which has now befallen us would not exist. At least not so soon. I am talking about the scientists who have known all along what Fleming knew, what Bechamp knew, and what Pasteur himself finally admitted: that bugs don't cause disease and that drugs don't cure them. Antibiotics were and are for one

thing only: life-threatening infections. Not minor colds. Not minor ear infections. Children need to be sick sometimes. That's how they build their own immune defenses. It's OK to get a cold once in a while; it gives the body a chance to use its powers of defense, like fever, inflammation, coughing, and swelling. These symptoms are not the illness. They are just signs that the body is successfully attempting to restore its own balance. To attack the symptoms is to fight the body itself and make it that much more difficult to return to a state of normal health. A body allowed to heal itself will be far more resilient, more RESISTANT in the future. That's the kind of resistance we want.

What we call disease is very often simply Nature's method for ridding the body of poisons.

For example, take FEVER. Fevers are generally good. The brain raises the temperature of the body for a reason - something has triggered an inflammation and the body is trying to make an inhospitable environment for the irritant and throw it off. Basic detox. Tylenol, ice baths, and drugs may interfere with the body's most instinctive first line of defense. Think how arrogant that is. Who knows better than your body when to turn up the thermostat? Now in that rare one in 5 million event where there's a danger of meningitis or the patient is delirious and remains in an extremely high fever for days on end - that may be the time to consider drugs. Like I said, life-threatening situations. But how often does that happen? When do we take antibiotics? Usually the first sign of a cold or fever. When we are young, they work. But most people use up all their ammunition early. Remember - average is 17 runs of antibiotics by the age of nine. Then when something serious happens, drugs fail. Not only are the bacteria now resistant; the body has never been given the opportunity to develop its own defenses, its own immune system. The result is just what the market growth drug industry wanted: a nation of people who are always sick, get colds a few times a year, have frequent headaches and digestive disorders and every few years get a "major" illness. Oh yes, and two thirds of whom will die either of heart disease or cancer.

> Or coughing. Why are we coughing in the first place? Coughing is a cleansing reflex of the respiratory system. It is good, not bad. An irritant such as dust or a chemical or an inflammation is disrupting the air passages. The body's natural response is to try and clear it by forcefully expelling air. Is this rocket science so far?

The cough was not the problem. The irritant was the problem. OK, so what do we do? Go to the doctor or the drugstore for what? - a cough suppressant. Drug the body's ability to clear its own airways. But then we have two problems: first, the irritant is still in the airway and has now been protected by the cough suppressor and is allowed to become more entrenched. And second, these cough medicines have serious side effects on the digestive tract. They are not foods but must be dealt with by the digestive system. And they destroy normal flora.

Yes, I hear you saying, but what about deep chest colds with coughing that might turn into bronchitis or pneumonia? Exactly. What about them? What will cough suppressants do to help the body clear itself?

Same with infection. Infection follows inflammation. Some antigen has been identified and the body has mobilized its forces - the white cells - to wall off the area. The invader is attacked, and many white cells are killed in the process. Pus is simply the accumulation of dead white cells that have done their job. Limited infection is not an emergency. It simply means that the body's defenses are working.

Again, Dr. Tilden Nails it:

"... every so-called disease is a crisis of Toxemia; which means that toxin has accumulated in the blood above the toleration point, and the crisis, the so-called disease - call it cold, flu, pneumonia, headache, or typhoid fever - is a vicarious elimination. Nature is endeavoring to rid the body of toxin. Any treatment that obstructs this effort at elimination baffles nature in her effort of self-curing."

Not your average medical doctor. Bet he did not get invited to give many keynote speeches at Harvard.

The only way anyone gets better from most illness is the body figures out a way to restore balance. It is not showy, and it is not always immediate. But it lasts.

No one who studies what is going on today in the area of antibiotic resistance comes away with the idea that things are going to be fine just as soon as some new drugs are invented. You come away with the idea that the party's almost over. Just as it was before penicillin, the only factor in disease control will be preparing a strong defense: bolstering the immune system. Those who continue to weaken their immune system will no longer be able to look to antibiotics to save them. They will die early

So, What Is the Immune System?

Lot of people talk about it, but just ask them what it is and see what they say. The immune system is complicated, so let's just do the short version for now.

In general, the immune system consists of three things that continually circulate through the body and monitor every cell.

And the three are:

1. Specialized blood cells, called lymphocytes or white cells
2. Specialized proteins called antibodies
3. Nerve communication

This constant monitoring of your cells is going on every second, 24 hours a day, all through the body. In the healthy immune system, the identification of something foreign triggers an attack. The attack usually takes the form of inflammation, swelling, or heat. If the attack turns into a battle, it may become an infection. These are normal physical responses and will be effective if left alone, in the vast majority of cases. They do not usually require drugs, surgery, or any freaking out. If the body's own defenses are allowed to do their job and to win, not only will the patient reC 19er with no side effects, but more important, he will have built stronger resistance for the future.

What helps the immune system? Only two things: protecting it and building it.

Protecting and building. Not stimulating. Certain drugs may stimulate the immune system, but it's short-term and always involves side effects.

The first consideration in protecting the immune system is to stop destroying it with:

1) Smoking
2) Alcohol
3) Prescription drugs
4) Processed foods
5) Dairy products
6) Sugar
7) Radiation
8) Toxins
9) Stress

For further explanation of these stressors, see the chapters on Enzymes and on Antioxidants, and also on Vaccinations.

To build the immune system is not easy, but it is simple. First, eliminate the above list of destroyers. Second, detox the colon and the blood. For information on how to do that, see the chapters on the Colon and on Enzymes. After that, keep further toxic intake to a minimum. Primarily, that means drugs and processed foods. Simple, huh?

The Cure For AIDS

…is actually known: At the International AIDS Conference in Berlin in 1993, the minutes showed that:

"A large number of women prostitutes have been disC 19ered in Africa. Each prostitute has had numerous encounters with men who have AIDS. Not one has contracted AIDS. Studies show that the women have exceptionally strong immune systems. This is the only difference between these prostitutes and others who have contracted AIDS."

Drugs depress the immune system, not just antibiotics, but all pharmaceuticals. That is why no drug will ever be found that cures AIDS. That is why AZT has never been proven to extend anyone's life even one day. That is why the search for the ultimate AIDS drug is futile. The virus does not exist in isolation and cannot be selectively killed without affecting the entire system. The whole approach, the whole military philosophy of seek- and-destroy is fundamentally flawed.

HIV is not the cause of AIDS; it is a sign of AIDS.

In an article in USA Today, 26 Nov 97 the WHO revised its earlier estimate. Last year they said there would be 22 million people in the world with AIDS by this time. Now they have revised that figure to 30 million.

Know what is going to happen with AIDS? Exactly what happened with every other disease ever encountered by the human race, except for the brief era of success with antibiotics: it will run its course through the species. It will kill those with the weakest immune systems, and then it will be gone. AIDS research? Politics.

As with Pasteur's anthrax vaccine and his rabies vaccine, drugs can actually bring new diseases into the human race. Like the unlucky French mailman, Pierre Rascol. He and his friend were attacked by a dog. The friend was severely bitten, but not Pierre. The dog's teeth did not puncture Pierre's skin. The friend did nothing and was fine. The dog was fine. The postal authorities found out about the incident however and forced an unwilling Pierre to be treated by Pasteur. After one week, Pierre was dead, a victim of Pasteur's inoculations. Look it up. (Hume)

Which Is It?

So, are germs the cause of disease, or aren't they? Bechamp said that there was enough truth in that notion to make it seem reasonable at first glance. Sure, we can sometimes identify certain types of bacteria in certain disease conditions. And it's undeniable that organisms can be found rampant within populations suffering from epidemics and outbreaks, as Laurie Garrett describes in The Coming Plague. But consider this: what if many more people

than those who actually get a disease have the "bug"? Usually the only people we test are the ones who get sick. So, it looks like they're the only ones who have the 'causative' organism in measurable amounts. From Pasteur to the present, there is an entire other point of view that has been supported: maybe the bad bugs are commonly present in many normal people, but only multiply out of control when allowed to because of a weak immune system. They are harmless until they proliferate. This is a fundamental notion.

"Bacteria and parasites cannot cause disease processes unless they find their own peculiar morbid soil in which to grow and multiply."

-Henry Lindlahr, MD - Founder of Lindlahr Sanitarium

In view of the overall failure of the one-drug-one-disease approach, it's obvious there must be a bigger picture. So here it is the body is poisoned year by year, leading to general toxemia (blood-poisoning.) The reasons are noted above: chemicalization of commercially available food, chemicalization of all medical drugs, and stressful toxic lifestyle. The body tries to detoxify itself by its normal processes of digestion and immune response. But it's too big of a job; there are too many weird chemicals. Digestion is blocked. The blood stagnates. The white cells and antibodies can't circulate. The colon backs up. And things breed. Favorable environments are created for the proliferation of normally harmless organisms. Result: disease. Totally different paradigm.

In the early 1980s, before AIDS had been named and before HIV had been pronounced as the cause, the researchers like James Curran of the CDC were studying the new disease that was occurring among urban gays. There was not enough money or manpower to fully investigate the problem, but scientists realized that this was a unique disease and they knew it was going to be big. Collecting all the data they could, they studied the gay lifestyle in detail. One of the few things they could say for sure was that these people as a population had one of the most severely depressed immune systems ever studied. To find a group of people with worse immune defenses than theirs, you would have to look in a third world country.

Curran found that urban gays did not just get AIDS - they had astronomically higher than normal incidences of any immune-deficient condition you can name, including:

1. Herpes Simplex I
2. Herpes Simplex II
3. Gonorrhea, Hepatitis A
4. Hepatitis B
5. Cytomegalovirus
6. Mononucleosis
7. Syphilis
8. Influenza
9. Candida albicans
10. Entamoeba histolytica
11. Cryptosporidium
12. Tuberculosis
13. E. coli
14. Staphylococcus aureus
15. Klebsiella
16. Pneumocystic pneumonia

Why bother to list them? The patients got these diseases on their way to getting AIDS. They also had proliferation of many other bacteria that are normally harmless. The point is, when there is no immune system, anything can grow. Favorable environment. The terrain. Le terrain biologique. AIDS patients don't die of AIDS. They die of pneumonia or of flu. They die because they have no CD-4 cells, no immune system to fight off even the most harmless invader. And they die from drugs.

When you start to look at the epidemiology of AIDS in Africa and then in Asia, all the talk is about genes and microbe vectors and modes of transmission and villages and patterns of migration of the virus, and numbers of the population already infected, and virulence, etc. But you can take the whole picture, all this information, and pick it up and rotate it 5 degrees to one side and look at it just a little differently and something else comes into focus. What

if we're wasting our time looking for a cure for AIDS or trying to figure out why it appeared in this or that village in Africa or this brothel in Thailand or trying to unlock the elusive patterns of recombinant viral DNA with computer sequencing or encouraging a new group of "disease cowboys" to get out there, or identifying Patient Zero, or even educating people about protection...?

What good is all this? Look at the numbers: by July of 1982 there were 177 known deaths from AIDS. By summer 1997, over 7 million have died. An estimated 30 million people worldwide are now infected. Are we getting better or worse at holding this disease in check? Is the talent and research money thrown into the fight becoming more available or less available? What if this disease is simply going to run its course throughout Homo sapiens no matter what we do, just like the plagues did, just like the majority of all other diseases have? May sound fatalistic, but it's precisely what's actually taking place.

Ask yourself this: what did urban gays and junkies have in common with the Africans and Asians who were being swept away by this deadly tidal wave? In a word, susceptibility. Why? Third world people are possessed of fragile, tenuous immune systems because of malnutrition, squalor, overcrowding, and appalling medical practices. They also have been targets for mass inoculations with unproven vaccines legislated upon them by government deals with drug giants. These people are physically stressed almost to the breaking point, normally. With overpopulation, all the adverse conditions are magnified.

It has been proven that the AIDS virus has been around for decades both in monkeys and in humans. But not until 1982 did people start dying of it. And then who was it, and who is it that is dying? The ones with what? That is right - the ones with the worst immune systems on the planet. Then and now. Viruses do not care if you are gay or you're a monkey or you're living in squalor, or in a townhouse. They are just looking for a place to set up shop.

This point of view redefines the problem. Instead of worrying about what are we going to do about AIDS, tracking it, fighting it, and relating it to antibiotic resistance, let's consider focusing instead on the only thing that will ever overcome AIDS or any other disease: a strong immune system. Oversimplification? Looks like it may be time for one.

What Now?

What does the future hold? Let us stop listening to the media magpie/spin doctors for a second and follow the pertinent literature to its logical conclusion - is antibiotic resistance becoming greater or less each year? Greater. Let's give antibiotics a best-case scenario guess: another 20 years. OK, do bacteria cause disease? Definitely not always. What is always present in diseases? Answer: depressed immune system. With a healthy resilient immune system, disease is rejected, no matter how serious. J.H. Tilden, MD put it this way:

"Normal persons are deadly to all germs and parasites peculiar to the human habitat."- Toxemia Explained

So, putting these ideas together, a notion comes into focus so clear that even a lawyer could see it: soon we will be living in the Post-Antibiotic Era. The paramount issue in health and survival will then be the immune system. Drugs, alcohol, smoking, air pollution, processed food, white sugar, white flour, radiation, stress, and bad living will still be doing their number on that immune system. But it will be performing without a net, this time. On its own. What will people turn to in order to strengthen their immune system? Answer: Alternative Medicine, just like before all of this went down. Actually, it is already started.

Ask your physician that one. Want to see a blank look? Ask your HMO doctor what he can give you to boost your immune system.

Out of the $1 trillion/year medical budget, about one point four per cent is today being spent for Alternative Medicine. That is not much, but it's growing. Alternative medicine's purpose is to use natural means to strengthen the immune system. Whole food enzymes, antioxidants, natural herbs, aloe, probiotics, pure water, clean diet, spinal adjustment, massage, martial arts, and exercise have all been proven to be helpful.

One reason things won't be completely the same as they were in the pre-antibiotic age is that our knowledge of holistic therapeutics has deepened exponentially, sort of as a by-product of the advances in biomedical technology

in the past 50 years. An increasing number of people are learning what it feels like to build up their immune system, their resistance to illness.

Once you've done that, even one time, you know you can overcome practically any health challenge out there by cleaning up your blood, simple detox, and following the basics. Taken as a whole complete self-regulating being, the body is simple and just needs a few things to maintain itself without disease, premature aging, or chronic poisoning. Things get complicated when the body is approached with what I call the Kragen Method - as in auto parts - meaning pretending that the body is simply a group of individual parts that can be treated in isolation from each other, one by one, like spark plugs and carburetors. Then we get into some heavy theorizing, dangerous chemical experimentation, and pathologically long words. Health then becomes a side issue, the focus is economic, and the patient becomes the mark. And this is the controlling philosophy in health care today.

You get a funny feeling, like an awakening, when it finally dawns on you that all this time scientific "research" has not really been progressing along with an intent to unC 19er deeper knowledge of nature or physical things, or to seek the truth, or to serve mankind, like they always say it is. Such altruism is carefully crafted and presented as the motivation for research, but the actual way it works may be quite different. It is not negativity or paranoia but rather the loss of naiveté that makes you realize that they don't really want a cure for cancer or AIDS or infectious disease or the common cold or obesity or depression or any other illness. No, for these drive the industry. The game is pharmaceutical economics.

A Normal Life

Here is what a normal life should be like:

You are born. You get no drugs and no vaccinations. During childhood you have the usual illnesses, but conservative treatment gets you through them without antibiotics or drugs, and you build your natural immune defenses. You do not eat white sugar, white flour, too much meat or cheese, or drink milk or soft drinks. You concentrate on

whole grains, fruits, vegetables, and a clean, natural diet. You never learn to drink coffee or to smoke cigarettes.

The only pills you take are powerful whole food vitamins and enzymes and minerals, which are part of your daily intake. You drink at least 1 liter of water every day. Into adulthood, you never get sick: no colds, no flu, no headaches, no diabetes, no ADD, no "thyroid problems," no panic attacks, growing pains, fatigue, or digestive disorders, no high blood pressure.

The only pains you experience come from accidental injury. Perhaps you do moderate exercise or sports activity to maintain mobility and general fitness. You look to the care of your spine. Your entire adulthood is spent in this disease-free mode. As you age, your mind gets sharper. You experience no arthritis or osteoporosis, no Parkinson's, or Alzheimer's. Finally, one day after 90 or 100 years, you flicker like a candle and go out.

The above paragraph may be useful in choosing a doctor. Some will say all this is impossible, which for them is true. So, don't choose them. All this is possible; moreover, thousands and thousands of people are living it. So, listen only to those who can help you achieve such a condition of living health. Because now we have arrived at the threshold of a time when good health and a powerful immune system are not only advisable; they are the very determinants of survival. Coming soon to your town - the Post-Antibiotic Age.

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Pasteur vs. Bechamp: An Alternative View of Infectious Disease

Marone Family WellnessPasteur vs. Bechamp: An Alternative View of Infectious Disease

"Le microbe n'est rien, le terrain est tout." (The microbe is nothing, the terrain is everything) –The last words of Louis Pasteur (Father of the "Germ Theory" of disease)

Pasteurization, named after scientist Louis Pasteur, who developed it, involves heating raw milk to exceedingly high temperatures in order to kill the germs and bacteria inside the milk and prevent infections. The idea is that "germs are bad" and that they are the cause of disease and ill health. Following that assumption, it makes sense that "killing germs" would be the solution to both treating and preventing states of disease. This is the basic concept—that germs (virus, bacteria, etc.) are the cause of illness—upon which Western medicine is based.

But there is a fascinating history behind both the "germ theory" of disease as well as its controversial proponent…Louis Pasteur. I invite you to do your own research by Googling "Pasteur vs. Bechamp" to see the many sources of information on this controversy. Meanwhile I will try to summarize our thoughts on this issue and how it relates to patients who come to us with illness related to chronic infections.

In 19th century France, while Pasteur was advocating the notion of germs as the cause of disease, another French scientist named Antoine

Bechamp advocated a conflicting theory known as the "cellular theory" of disease.

Bechamp's cellular theory is almost completely opposite to that of Pasteur's. Bechamp noted that these germs that Pasteur was so terrified of were opportunistic in nature. They were everywhere and even existed inside of us in a symbiotic relationship. Bechamp noticed in his research that it was only when the tissue of the host became damaged or compromised that these germs began to manifest as a prevailing symptom (not cause) of disease.

To prevent illness, Bechamp advocated not the killing of germs but the cultivation of health through diet, hygiene, and healthy lifestyle practices such as fresh air and exercise. The idea is that if the person has a strong immune system and good tissue quality (or "terrain" as Bechamp called it), the germs will not manifest in the person, and they will have good health. It is only when their health starts to decline (due to personal neglect and poor lifestyle choices) that they become victim to infections.

You can see this when a group of people go hiking in the woods. It often seems that the mosquitoes attack only one or two people out of the group. And as it turns out, it's always the same person that always gets attacked by the mosquitoes. This person is usually the one who always catches the latest flu and has the weakest immune system. This is because these germs (including insects) are opportunistic in nature and only attack the weak.

To treat illness, Bechamp's cellular theory also applied. Bechamp was less concerned with killing the infection and focused more on restoring the health of the patient's body through healthy lifestyle choices. Bechamp saw the infection as a footnote to the state of illness and not the primary cause. As the person restored health through diet, hygiene, and detoxification the infection went away on its own–without needing measures to kill it.

Pasteur and Bechamp had a long and often bitter rivalry regarding who was right about the true cause of illness. Ultimately Pasteur's ideas were accepted by society and Bechamp was pretty much forgotten. The practice of

Western medicine is based on Pasteur's germ phobia which gives rise to the use of vaccinations, antibiotics, and other anti-microbials.

The irony is that towards the end of his life, Pasteur renounced the germ theory and admitted that Bechamp was right all along. In the 1920's medical historians also disC 19ered that most of Pasteur's theories were plagiarized from Bechamp's early research work.

At Marone Family Wellness, we make recommendations to patients analyzed with infectious illness using the guidelines set forth by Antoine Bechamp:

"Treat the patient, not the infection."

We do this through our threefold approach of detoxification, nutritional healing, and restoring internal communication through chiropractic.

We feel that Bechamp was indeed right when he said that as health returns to the patient, the germs and infections leave on their own and do not come back unless health becomes compromised again. We have found this approach to be very satisfying in terms of results for the patient.

We feel that it is a mistake to try to kill the infection directly rather than searching for the cause as to why that person's immune system did not handle the infection on its own. Sadly, Pasteur's approach of killing germs is used by a large number of so-called "natural" healers who use large amounts of anti-microbial herbs in the same philosophical fashion as antibiotics. We feel that if all you do is kill the infection without addressing the dysfunction in the patient's immune system (which allowed the infection to manifest in the first place), the patient will simply become sick again at a later date.

Another problem with this approach is that in chronic infections you almost never see just one type of infection. When a person's immune function becomes compromised, one infection such as a bacteria will open the door to other infections such as viruses, parasites, and fungi. It's like when one burglar enters your home and holds the door open for his friends to come in. When this occurs, as it does in almost all immuno-compromised patients, focusing on

treating the infection directly becomes a never-ending nightmare. Once one bug is gone, the next one appears. However, if you focus on treating the body's self-defense mechanism against infections (immune function), the body will handle the infections on its own, as it should have in the first place.

-- http://maronewellness.com/pasteur-vs-bechamp-an-alternative-view-of-infectious-disease/

Pasteurian Germ Theory Vs Bechamp Cellular Theory

Germ Theory (Pasteur)	**Cellular Theory (Bechamp). Pleomorphism**
1. Disease arises from micro-organisms outside the body.	Disease arises from micro-organisms within the cells of the body.
2. Micro-organisms are generally to be guarded against.	These intracellular micro-organisms normally function to build and assist in the metabolic processes of the body.
3. The function of micro-organisms is constant.	The function of these organisms changes to assist in the catabolic (disintegration) processes of the host organism when that organism dies or is injured, which may be chemical as well as mechanical.

4. The shapes and colors of micro-organisms are constant	Micro-organisms change their shapes and colors to reflect the medium
5. Every disease is associated with a particular micro-organism	Every disease is associated with a particular condition.
6. Micro-organisms are primary causal agents.	Micro-organisms become "pathogenic" as the health of the host organism deteriorates. Hence, the condition of the host organism is the primary causal agent.
7. Disease can "strike" anybody.	Disease is built by unhealthy conditions.
8. To prevent disease we have to "build defenses".	To prevent disease, we have to create health.

GERM THEORY (Pasteur)

1. Disease arises from micro-organisms outside the body.
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3. The function of microorganisms is constant.
4. The shapes and colors of microorganisms are constant
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CELLULAR THEORY (Bechamp).

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5.) Every disease is associated with a particular condition.
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7.) Disease is built by unhealthy conditions.
8.) To prevent disease, we must create health.

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http://www.whale.to/v/germ.htm

Lock Down Rate of Contagion is 20 Times Higher Than in the Open Air

This is a no brainier. Which breeds more contagion, a closed room, or an open-air environment where the sun is sterilizing surfaces and people have room to breathe and circulate in the open breeze? The WHO also stated that C 19 is less virulent than influenza. They say it is spread by droplets and cannot linger in the air. Equally there is little evidence that flu transmission is airborne.

The UK government are among the many who apparently ignored the most basic concepts in virology and chose instead to base their lockdown regime upon the fictitious Imperial College models. All the science indicated that existing measures, encouraging the public to observe basic hygiene and limit interactions with vulnerable people, was working, as C19 followed the normal bell curve of any viral disease in a population.

There was no scientific justification for the lockdown. Nothing about the UK State's response was "led by the science."

Nor is there any evidence that lockdown regimes have any positive impact upon infections rates. Comparisons between severe lockdown states and those who opted for less draconian measures reveal no advantage to placing your population under house arrest.

States who chosen not to rip their economies apart appear to have fared much better. Sweden did not deploy a lockdown and yet, according to data from John Hopkin's University, case rates per million of populations are lower.

Further comparative analysis supports these findings. In terms of limiting infection rates, there is no discernible benefit to lockdown regimes. In fact, Oxford University found a direct correlation between infection rates and the relative severity of lockdown regimes. It suggests the more stringent the lockdown, the higher the infection rate.

This is not unexpected, as numerous epidemiological studies have shown that infection rates for C19 are higher when people are exposed to it for prolonged periods in confined spaces. The viral load increase in a close room, whereas in the open air and circulating about, a person has far less chance of acquiring a viral load, in that all CVes, C 19OD 19 included, die quickly in open air and when exposed to UV radiation (sunlight). Locking people up in their homes is the worst thing you could do if you wanted to reduce the infection rate and the duration of the outbreak.

This is well known to the World Health Organization. In their joint study with Chinese authorities, published in February, the WHO stated that

airborne spread was not reported for C19 and was not considered to be a method of transmission.

They found that most infections occurred within families where the chance of infection was as high as 20%. However, the chance of infection in the community was estimated to be between 1-5%.

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Hong Kong is one of the most densely populated, if not the most densely populated, cities in the world. (7.451 million people) They were not under any lock down, and in three months they only had 4 cases of C 19. That is a .00000000005% infection rate with no lockdown at all in "C 19 infected" China. So much for sheltering in place to thwart contagion.

--https://off-guardian.org/2020/04/29/lokin-20-the-lockdown-regime-causes-increasing-health-concerns/

LOKIN-20: The Lockdown Regime Causes Increasing Health Concerns

A new public health crisis, very recently identified as LOKIN-20, is raising increasing health concerns in the UK. In their response to a respiratory illness called C 19 (C19) the UK State are among those who have responded by locking up their populations and destroying their own national economy. This appears to be causing LOKIN-20.

The most recent statistics from UK's Office of National Statistics (ONS) raise significant concerns about health impact of the lockdown regimes favored by some, but not all, governments. All in response to a disease which researchers at the Centre for Evidence-Based Medicine at Oxford University estimate to have an infection fatality rate (IFR) of between 0.1% and 0.36%... similar to seasonal flu.

Of course, a syndrome called LOKIN-20 has not been identified as a cause of death. However, in light of the current data, this post asks if it should.

Lokin-20 And the Lack of Scientific Justification

Both Public Health England (PHE) and the Advisory Committee on Dangerous Pathogens (ACDP) were satisfied that C 19 (C19) presented a "low risk" of mortality and downgraded it from the status of a High Consequence Infectious Disease (HCID) on March 19th. The ACDP board members include Professor Neil Ferguson from Imperial College. Presumably, Prof. Ferguson was among the dissenting voices on the ACDP board as he completely ignored the majority opinion of his scientific colleagues.

In an interview on 13th February, widely reported by the mainstream media (MSM), he stated his predictive models were "not absurd."

He said that infection rates of 60% of the population with a 1% mortality rate were possible. Standing by his prediction of 400,000 C19 deaths in the UK. The Imperial College computer model report was released to the public on 16th March, predicting huge numbers of deaths from C19. By the

19th March Prof. Ferguson must have known a majority of his peers disagreed with him.

When it comes to wildly inaccurate predictions Prof. Ferguson's work at Imperial College has a long and distinguished history. In 2002, he said that 50,000 people in the UK would die from "mad cow disease", to date less than 200 have died; he predicted 200 million global deaths from the H5N1 bird flu. Currently it is a suspected factor in the deaths of 455 people worldwide; in 2009 he told the UK Government that 65,000 could die from swine flu in the UK and worked with the World Health Organization to predict millions of deaths from the H1N1 global flu pandemic.

Suspected resultant UK deaths from swine flu were estimated to be 457 and the global total showed 18,500 laboratory-confirmed deaths from the H1N1 pandemic. The U.S. Center for Disease Control (CDC) claim there were many more, though their estimate varies between 150,000 and 500,000.

Quite an error margin and still considerably less than Imperial Colleges fantasy. The CDC is heavily funded by flu vaccine manufacturers.

While Prof. Ferguson and his Imperial College colleagues have been consistently wrong, they have also been unquestioningly believed by governments and intergovernmental bodies on every occasion. Seemingly without reservation.

Despite the clear evidence to the contrary, policy makers from all political parties have shown tremendous loyalty to Imperial College's silly data models. In doing so, they have not only ignored the researcher's woeful history of failed predictions but have also denied the scientific evidence which usually contradicts them.

In no way can basing policy decisions on Imperial Colleges computer models be considered science led decision making. Quite the opposite.

Lokin-20 And Lockdown Madness

Farr's Law is observed with all viral diseases and describes the rate at which a viral infection increases and then declines in a given population.

Initially, the virus has practically unlimited hosts and the rate of increasing infection is exponential.

As more people become infected that rate declines. The numbers still increase but the rate of that increase drops sharply. Once the rate starts to decline virologists and epidemiologists can then predict the scale of the outbreak with some confidence.

It indicates that the disease has passed its peak potential and will wane naturally in the coming days and weeks. Regardless of intervention.

Based upon UK statistics released by Worldometer we can see this initial rapidly increasing rate of infection and identify when that rate began to slow down. For the 50-day inclusive period, between the February 25th until April 15th, this changing rate of increase was evident.

That rate peaked on the March 4th and has declined since. Following the drop in this rate on the 4th, with a consistent downward trend to March 16th, the scientists on the ACDP board could predict the trajectory of the disease with some certainty and consequently downgraded C19 due to low mortality rates.

Calculating the daily rate of increase can be done simply by dividing the current day's total number of cases by the previous days total. For example, on March 3rd there were 51 total cases rising by 36, to reach a total of 87, by March 4th. A ratio rate increases of 0.71.

This was the peak rate of increasing infections in the UK. From this date onward the rate of increase declined markedly, in accordance with Farr's Law. We can plot these figures to find the changing rate of the increase in cases.

This slowing rate of new infections is also evident when we look at the logarithmic scale of UK Infections rates. This produces the familiar infection rate curve synonymous with Farr's Law.

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that existing measures, encouraging the public to observe basic hygiene and limit interactions with vulnerable people, was working, as C19 followed the normal bell curve of any viral disease in a population.

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Lokin-20 Lurks Behind the Data

About the only consistent element of the narrative we have been given about C19 is that we must believe the death toll is horrendous. This "alarmism" has been spread by State officials and the mainstream media (MSM). It is unmitigated drivel.

Here are some important factors to bear in mind whenever the MSM give you statistics about alleged deaths from C19 in the UK. These factors are unique to C19.

The ONS recording system was changed by the State, but only for C19, from recording only registered deaths to adding in provisional deaths assumed to be from C19. The RT-PCR test for C19 does not appear to be exceptionally reliable. Furthermore, the man who won the Nobel Prize for designing it specifically stated that it could not identify a virus. As previously stated, emerging studies indicate a much higher infection and thus much lower mortality rate for C19.

However, in the UK, a positive test is not even required for someone to be deemed to have died from C19. Nor does there need to be any clear evidence of causality for C19 to be declared as the underlying cause of death.

Merely "mentioning" C19 is considered enough. Regardless of other, often multiple, comorbidities and infections. In addition, from an age demographic perspective, C19 deaths appear to be indistinguishable from quite normal mortality.

The Office of National Statistics (ONS) have reported a consistent rise in mortality between weeks 11 – 15, C 19ering the period 7th March to 10th April 2020 in England and Wales. During that period deaths from all causes (all-cause mortality) have steadily climbed and have been above the ONS 5-year average in weeks 14 and 15.

The ONS calculate the mean average from the 5 preceding years completed statistics. This means that any year prior to 2014, many with much higher than average mortality, are not used to calculate the current average.

There is no evidence that this year's mortality rate in England and Wales is in any way unprecedented. In recent history 1995, 1996, 1998, 1999 and 2017 have all been years with comparable, if not higher mortality. None were deemed reason to force the population to incarcerate themselves.

The demographics of the UK show a growing but ageing population. Age is the primary corollary for normal mortality and C19 is no different. The ONS expect the 5-year average figure to steadily increase while the population continues to age.

The MSM regularly report C19 suspected deaths among the relatively young. This is to give you the impression that C19 can strike anyone at any time.

What they consistently fail to mention is that PHE records of ICU admissions for influenza indicate all ages are at risk from the flu. This is not the case with C19. Its risks apparently increase with age.

There was a media frenzy when the ONS released their all-cause mortality statistics for Week 15.

This showed there were 7,996 deaths over and above the 5-year average. In total 6,213 mentioned C19. Despite the MSM's attempt to convince you this somehow proves C19 is a modern-day plague, a cursory look at the data demonstrates that it is no such thing.

The ONS noted that these were the highest single-week mortality figure for England and Wales since 2000. This is true; however, the historical data

also demonstrates that one-week statistical record was exceeded in 2000, 1999 and 1997. Bluntly, not only is there nothing unprecedented about the overall mortality figures, the high one-week spike isn't anything new either.

To further put this into perspective, the population of England and Wales in 2000 was just under 53 million. In 2020 it conservatively stands at more than 60 million. That is more than a 13% increase in 20 years, with a notable ageing of the population over the same period.

Normalizing for population growth alone, irrespective of ageing, if 20,566 died in one week in 2000 then week 15 mortality figures in 2020 are equivalent to 16,109. About 4,450 fewer than in 2000, in relative terms. If we take similar normalization into account for previous years of high mortality (1995, 1996, 1998, 199) then, as a percentage of population, relative 2020 mortality statistics are well below those years and further below 2017.

As the death rate from C19 reduces in the UK, it is clear that the C19 threat level never warranted the lockdown regime and the collapse of the economy. At the risk of being accused of heresy, it is absolutely possible to state that C19 is like the flu in many respects.

Lokin-20 Seen in The Data

As usual, in their week 15 report, the ONS noted what appeared to be a deliberate attempt to inflate the C19 mortality statistics. Of the 6,213 reported C19 deaths, for week 15 in England and Wales, 2,333 also mentioned both influenza and pneumonia. It is impossible to see how these deaths can legitimately be called C19 deaths.

Consequently, all that can be said is that of the 7,996 excess deaths, beyond the 5-year average, 3880 deaths mentioned C19 on its own, though we know from previous releases that more than 90% of those had at least one other serious comorbidity. The remaining 4116 deaths were also attributable to at least one other infection and additional comorbidities.

The confusion about causes of death has been highlighted by the Royal College of Pathologists who have called for a systemic review. The Health

Service Journal reported that there was “uncertainty” about reported C19 deaths and questions remained about how many may have died as a “knock on” consequence of the lockdown.

The reasons for skepticism becomes clearer when we look at comparative death in the first 15 weeks of 2020. This shows considerably higher numbers of deaths from respiratory infections other than C19 in England and Wales.

When we also consider that attribution of C19 deaths are uniquely vague, and that a considerable proportion may well be attributable to influenza or other respiratory infections, the MSM’s insistence that C19 is the only story doesn’t stack up. Something else is happening too.

Frankly, we have no idea how many people have actually died from C19. Nor does the UK State.

Speaking on the 18th March the UK’s Chief Scientific Officer, former GlaxoSmithKline head of research and development, Sir Patrick Valance, clarified the situation for the British people. He stated:

It is worth remembering again that the ONS rates are people who’ve got C 19ID on their death certificates. It does not mean they were necessarily infected because many of them haven’t been tested. So we just need to understand the difference.”

The difference appears to be that the C19 is the first disease in history from which you can officially die without any firm evidence that you actually had it.

The symptoms of C19 are ridiculously hard to distinguish from symptoms of other respiratory infections, such as influenza and the common cold. Diagnoses from symptoms alone seems even more unreliable than the RT-PCR test. Yet the ONS confirmed this is how C19 can be identified as a cause of death:

A doctor can certify the involvement of C 19 based on symptoms and clinical findings – a positive test result is not required.”

This is a consequence of the State's advice to doctors which informs them:

If before death the patient had symptoms typical of C 19 infection….it would be satisfactory to give 'C 19' as the cause of death."

As recorded C19 mortality shows a decline, once again, the state is changing the way statistics are recorded. It has now asked the Care Quality Commission (CQC) to record more suspected cases from social care settings. Speaking on the April 14th a CQC spokesperson reportedly said:

From this week, the death notifications we collect from providers will allow them to report whether the death was of a person with suspected or confirmed C 19."

If the system for recording hospital C19 deaths is questionable the one suggested by the CQC for care homes is downright bizarre. At the request of the State the CQC have asked non medically trained care home providers to report, what they suspect, are C19 cases. These figures will then be added to the claimed C19 mortality figures.

The lack of testing in care settings suggest the CQC will be adding far more suspected cases to the ONS statistics than confirmed. Care homes, other than nursing homes, do not typically retain medically trained staff. The vast majority of those who suspect C19 from care homes won't be basing their suspicions on qualified medical opinions.

The claimed C19 mortality figures are so disparate they have become practically worthless from a statistical perspective. Even if we accept all reported C19 deaths resulted from it, which is an awfully long stretch, clearly something else is also pushing up excess mortality in England and Wales.

Over the two-week period of weeks 14 and 15, of the 14,078 additional deaths, 8189 people lost their lives due to something other than just C19. We don't yet know what other factors may be playing a part in the increase. All we can say is that excess mortality was unusually high and, at most, plausibly claimed C19 deaths accounted for less than 42% of those deaths.

So, what other changes may have impacted mortality this year? One in particular stands out. The lockdown itself.

Are we starting to see the consequences? Could we call this LOKIN-20?

The evidence strongly suggests that possibility.

Lokin-20 Disproportionately Affects the Most Vulnerable

LOKIN-20 appears to be the increased health risk caused by the lockdown regime. Those most at risk from LOKIN-20 are the same people who are at highest risk from C19. This additional "wave" of mortality, as a direct consequence of the lockdown, has recently been highlighted by NHS data analysts Edge Health.

Based upon ONS weekly figures, their comparative analysis of excess mortality and A&E attendance highlighted the significant impact of LOKIN-20. Speaking of an initial second and then third wave of mortality, from the impact of the lockdown, the co-founder of Edge Health George Batchelor said:

"If projected forwards, these numbers get so large it is hard to relate to them on a personal level. Unlike the current peaks, this third wave may be spread out over a longer period of time. But make no mistake this could be a very deadly wave."

Those who require home care, vulnerable adults in care settings and older people in care homes, have been all but abandoned by the State. This is a direct result of its counterproductive lockdown regime. Dying from systemic neglect appears to be a symptom of LOKIN-20.

During the alleged response to the C19 pandemic you might imagine the State would streamline vulnerable people's access to potentially lifesaving medical interventions. However, it has done the precise opposite.

Spreading disinformation, the MSM reported that there were 7,500 C19 deaths in care homes in weeks 14 and 15. This was fake news.

Of the 7,500 excess care home deaths only 1,500 were attributed to C19. Analysis by the Health Service Journal (HSJ) found that 80% of these people probably died from something else.

They identified 6000 people, without diagnosed C19, who had died in care or at home. Were it not for the lockdown these people would otherwise have gone to hospital.

The HSJ assumed these people would have died anyway, and they may well be right. But who knows how many would still be with us had they received the hospital care they needed.

This appears to be just one of the health consequences of the States lockdown regime. It seems to be precipitating vulnerable people's deaths in a variety of ways.

During the same period, the NHS issued guidance which stated care home residents should not be conveyed to hospital. At the same time ambulance response times increased dramatically. Being unable to get emergency medical support when you need it is another apparent LOKIN-20 symptom.

Rather than more closely monitoring care homes and isolating vulnerable people from infection, the State decided not to bother. The care industry has been calling for widespread testing and Personal Protective Equipment (PPE) since the start of the outbreak. So far neither the testing nor the PPE has materialized.

There is currently considerable capacity within the NHS for the people dying in care homes to be treated in hospital. The State continues to build Nightingale Hospitals across the country, most of which are completely empty. While we are misled into believing people are dying in their many thousands in care homes from C19, it appears most are dying from a lack of treatment from every condition other than C19.

Instead of providing medical treatment there are widespread reports of residents having "do not attempt resuscitation" (DNAR) notices attached to

their care plans by visiting NHS practitioners. Other more vulnerable adults, such as those with learning difficulties, who frequently have additional comorbidities, are also effectively being told to drop dead.

The UK's home care industry, providing care to older people living in their own homes, warns that many providers are unable to cope with the additional costs imposed upon them by the lockdown regime.

Raina Summerson, the chief executive of one of England's largest home care provider Agincare said:

"With a lack of funding and sky-high costs of PPE, there will be providers who go bust…. Overnight, local authorities will have the responsibility of picking up care

for bankrupt providers but will not have resources to do so. It could well mean people left without care and, in the worst-case scenarios, falling through the cracks and dying alone at home."

The UK Health Secretary Matt Hancock recently made the magnanimous gesture of allowing families to see their loved ones who were dying of C19 in care homes. Whether that offer extends to the families of the majority who are seemingly dying from a lack of medical treatment isn't clear.

Meanwhile, under his watch, either by design or rank ineptitude, the UK State has effectively created what appears to be a euthanasia program. His platitudes are grotesque.

Lokin-20 is Everywhere

Accident and Emergency attendance has dropped to a record low while the percentage of admissions following attendance have risen to a record high. This means people are presenting to A&E for suspected C19 but little else. However, given the dramatic increase in ambulance response times, perhaps many are simply not making it to A&E alive.

Dr Katherine Henderson, the President of the Royal College of Emergency Medicine, stated:

We are concerned that this drop in attendance may mean that people with serious health problems are avoiding going to their emergency department for fear of getting CV….Even before C 19, we knew that patients were getting sicker – people are living longer and acquiring more health problems……The most important thing the public can do at the moment is to stay indoors and follow the government's advice…..But do seek medical help if you need it – don't stay at home with a heart attack out of fear."

Dr Katherine Henderson

I think we can all agree that the State and the MSM have ramped up fear of C19 to quite extraordinary levels. As we have discussed, the medical and scientific justification for this is largely absent. The propaganda seems primarily designed to justify the lockdown regime.

It is absurd for the State and senior health professionals to now express concern that people are not going to hospital when they need to. Of course, they are not.

To claim this was unforeseen is ridiculous. The whole UK propaganda narrative has urged people both to be terrified of a flu-like illness and stay away from health services to "protect the NHS." The first annual increase in coronary heart disease mortality in the UK, following nearly two decades of steady reductions in the UK, was noted last year, before LOKIN-20 began.

The former president of the Society for Acute Medicine Dr Nick Scriven stated:

"The biggest fear is people sitting at home ill and not attending A&E […] people feeling sick at home or having a heart attack and not coming to hospital as they are frightened…We have seen a few sick young people just sitting at home for five or six days getting worse and worse".

The president of the British Cardiovascular Society Simon Ray stated:

"It seems there has been a uniform reduction in hospital attendances for heart attacks…..it's around 40% down in terms of callouts for emergency treatment for heart attacks….There also seems to be substantial reduction in

referrals in for acute coronary syndrome….A number of units have also reported people presenting late with complications due to having a heart attack that we don't normally see. The concern is people sitting out symptoms rather than calling help."

It is clear, people with acute need for cardiovascular treatment are not presenting to hospital as they otherwise would. Fear driven reluctance to access health services, when they are most needed, appears to be another symptom of LOKIN-20.

Around 170,000 people die every year from cardiovascular disease in the UK. A 40% reduction in callouts present a potential health crisis which dwarfs any perceived risk from C19.

This is entirely due to the lockdown. Part of what we might call the LOKIN-20 condition.

There is no "surge" in C19 patients and there are more empty hospital beds than ever before. Yet the risk to cancer patients from withheld treatment has increased significantly during the same period. Thanks to LOKIN-20.

This prompted Gordon Wishart, Professor of Cancer Surgery at Anglia Ruskin School of Medicine, to write to State officials urging the rapid reestablishment of access to screening and treatment for cancer patients. He stated:

> We pushed the panic button and there was a knee-jerk reaction when it was thought there would be hundreds of thousands of deaths from C 19ID […] However, in the event it seems we are at or near the peak and that capacity has not been needed […] We have the worst cancer survival rates compared with many of our European neighbors […] We are not in a position to cope with any increased demand at the end of lockdown."

A leading heart surgeon, Professor Stephen Westaby, said:

…We could see thousands of deaths from heart disease and cancer over the next six months. Their families will never forget this. Neither China nor

Italy stopped treating these conditions despite the chaos there earlier this year. It's bizarre."

How many of the additional deaths we are seeing now are caused by LOKIN-20?

Early indications from the ONS suggest the lockdown regime is having a considerable additional impact upon the nation's health. Approximately 84% of people surveyed stated they were worried about C19. Nearly half reported an increase in anxiety levels.

Anxiety increases the risk of cardiovascular disease and a range of other health conditions. Studies have shown a clear link between increased levels of anxiety and depression in children and adolescents. LOKIN-20 is seemingly creating a mental health crisis too.

Depression often has a lifelong impact and substance misuse, domestic abuse, low income, and other comorbidities are all frequent consequences. The head of the department of psychiatry at the University of Cambridge Professor Ed Bullmore reported:

The pandemic is clearly having a major social and psychological impact on the whole population, increasing unemployment, separating families and various other changes in the way that we live that we know are generally major psychological risk factors for anxiety, depression and self-harm."

However, it is not the pandemic that is "increasing unemployment" and "separating families" but rather the baseless lockdown regime of the State.

The kind of economic devastation caused by the lockdown regime, unlike C19, is genuinely unprecedented. The Office of Budget Responsibility (OBR) predict a 35% drop in the UK's GDP with an additional 2 million job losses. For some reason they envisage the UK economy will instantly reC 19er from this hammer blow. Others are far less confident.

The Institute for Social and Economic Research (ISER) predict that nearly one quarter of UK jobs (more than 6.5 million) will be lost thanks to the lockdown. Failing to see the "bounce back" predicted by the OBR they state:

Our baseline scenario predicts an overall contraction in GDP and employment of around 20%."

Whether the OBR or the ISER predictions are accurate it is obvious that the economic and social impacts of the lockdown regime will be catastrophic.

Social deprivations and poverty, already on the rise before the alleged C19 pandemic, are set to soar. The link between economic deprivation and mortality is not in doubt.

Between 2001 and 2016 economic and social deprivation in England consistently accounted for a staggering 9.3-year average reduced life expectancy for males and, by 2016, shortened women's lives by 7.4 years. Millions of lives will be cut short by LOKIN-20.

It is an incredibly sad reality to acknowledge that the loss of life from C 19 is as nothing by comparison. LOKIN-20 won't end in a few weeks. It will continue for years to come. The longer the State persists with its destructive lockdown regime the worse will be the consequences of LOKIN-20.

--https://off-guardian.org/2020/04/29/lokin-20-the-lockdown-regime-causes-increasing-health-concerns/

Real Doctors Discuss Virology

Dr. Stefan Lanka and the Virus Debate

Since the early 1990s, German biologist Dr. Stefan Lanka has been at the forefront of challenging the medical theory stating that viruses are the cause of infectious diseases such as hepatitis, AIDS, the flu, polio, herpes, or measles.

Caroline Markolin has presented Dr. Lanka's activities in her lecture video "Virus Mania" in great details (watch Part 2 of the recordings on this website – starting at 08:08).

Based on his studies in virology, Dr. Lanka disC 19ered that viruses are vital components of simple life-forms that do not exist in complex organisms such as humans, animals, or plants. His research shows that the viruses believed to cause "viral infections" are in reality ordinary cell particles that have been misinterpreted as constituents of the viruses in question. Dr. Lanka also determined that viruses don't have a destructive effect on the host, as commonly believed. These findings are in full accordance with the disC 19eries of Dr. Ryke Geerd Hamer who demonstrated already in the 1980s that contrary to the standard theory, microbes do not harm the organism but play instead a supportive role during the healing process of diseases (see Fourth Biological Law of the New Medicine).

https://learninggnm.com/SBS/documents/virus-trial.html

Dr. Andrew Kaufman Exposes Fake CV Pandemic: Viruses are Simply Our Body's Exosomes

Hello everyone, my name is Dr. Andy Kaufman I've been talking a lot lately about this viral pandemic, and I've learned some things lately that have helped me develop a theory. I think I know what is really going on here, so I want to give that information to everyone. One paper from a research group out there in Wuhan claims to have identified a new strain of CV, which they said was due to pulmonary infiltrates and congestion in the lungs. However, after three days of antibiotics, people did not get better, and so, though they did think the illness was a bacterial infection and went right to the virus hypothesis.

They were primed to assume a virus was responsible for this illness right away, but how did they claim to have proved that a virus was responsible? They took seven, only seven, out of the out of the almost two hundred initial patients who were sick and they stuck a fiber optic camera tube down their windpipe into their lungs, squirted an innocuous fluid in there, mixed it around,

collected whatever debris, cells, or chemicals were in the lungs, and then they sucked it back up for analysis. Additionally, they did take some other bodily fluids, blood samples, and ran oral and nasal swabs, but it was in the lung fluid where they think they found what the culprit was.

And so, when they took this lung fluid out, they did not first try to find a virus in there, and separate and purify it, but rather, the **FIRST** thing they did was find and separate some kind of genetic material. What they found was some RNA. But I'll tell you that in our bodies, at any given time, there is an abundance of genetic material freely circulating around our blood stream, body fluids, as well as contained in various types of intra and extracellular structures There is also the normal bacteria that live in our body, including in the lungs.

They then determined the genetic sequence of their sample, which is basically the code of the genetic material, so they determined all of the base pairs, the order of that sequence, and then they rushed to rapidly develop a diagnostic test which is a qualitative PCR test. A Polymerase Chain Reaction (PCR) is a method widely used in molecular biology to rapidly make millions to billions of copies of a specific DNA sample, allowing scientists to take a very small sample of DNA and amplify it to a large enough amount to study in detail.

In other words, **BEFORE** they really proved anything, they already proceeded to develop a test. This is unheard of in Epidemiological science. Why would you rush into developing a test for something you had not even accurately diagnosed, yet?

It is a fishy as the Wuhan Fish Market.

--Adapted from the work of Dr. Andrew Kaufman,
https://www.youtube.com/watch?v=8PqseTvCMwE

Dr Shiva Ayyadurai MIT Ph. D Asserts That Fauci, Birx, Gates, and Big Pharma Need to be Indicted for Crimes Against Humanity

As any solution to any pathogen, we need to understand that the pharmaceutical medical establishment, for hundreds of years, has built its entire foundation upon blaming a virus or a germ on illness rather than pointing out the role of the weakened immune system on disease.

Recall scurvy, when people's teeth would fall out and they had bleeding gums, and it was said that it must be a virus, when, in fact, it was simply a deficiency in vitamin C. Scurvy was a huge problem for English sailors in the 1600s and 1700s. Doctors eventually deduced that lime juice would work better because it has more acid than lemon juice, so they substituted lime juice for lemon juice on the English Royal Navy ships. And that is how the English sailors became known as Limeys.

Hundreds of years later, Pellagra was identified. Pellagra is a disease caused by a lack of the vitamin niacin (vitamin B3). Symptoms include inflamed skin, diarrhea, dementia, and sores in the mouth. Areas of the skin exposed to either sunlight or friction are typically affected first. It was not until 1937 that Conrad Elvehjem disC 19ered that Pellagra is caused by a dietary lack of the B vitamin niacin, along with reduced levels of the essential amino acid tryptophan, which is found in milk, cheese, fish, meat, and egg.

However, prior to Conrad Elvehjem's discussion on nutrition's role in Pellagra, Italians who were coming over on ships, were thought to be bringing dangerous germs, and so they were needlessly quarantined, much like this C 19 situation.

And many more examples abound to show us that what we are seeing here is the virus, germ, and bacteria hunters create fear of contagion rather than directing attention to the real culprit behind disease…a compromised immune system. And so, the real solution is to recognize that the immune system is quite strong, and we are a walking ecosystem of germs, 380 trillion viruses, and

62 trillion bacteria, among over six trillion cells. There are viruses all around and inside us. But a strong immune system always handles this environment. It's only the weakened immune system that has problems, and if you stay indoors, robbing yourself of UVB Sunlight and its natural Vitamin D results, and wear a suffocating mask all the time, that you see a significant decline in the strength of the immune system's ability to accommodate the natural viral and bacterial environment that we all exist within, quite symbiotically, otherwise. There's good reason why vitamin D is called "the sunshine vitamin." When your skin is exposed to sunlight, it makes vitamin D from cholesterol. The sun's ultraviolet B (UVB) rays hit cholesterol in the skin cells, providing the energy for vitamin D synthesis to occur.

Okays so the issue is how do you beef up the immune system? First, Vitamin D is an antimicrobial. It is released by being in the Sun. Do not shelter in place, go outside, problem solved. Next, we need Vitamin A, which is naturally found in rich leafy, dark green vegetables and fruits. Vitamin A supports your body to create keratin cytokeratin. Cytokeratins are keratin proteins found in the intracytoplasmic cytoskeleton of epithelial tissue. They are an important component of intermediate filaments, which help cells resist mechanical stress. Cytokeratins help form the tissues of the hair, nails, and the outer layer of the skin. They are also found on cells in the lining of organs, glands, and other parts of the body. Keratin is found naturally in vegetables like kale, broccoli, onions, leeks, and garlic. Include these foods in your meals to boost your body's keratin naturally. Liver, fish, yogurt, and low-fat milk are other good food sources of keratin.

Though Vitamins D and A are two foundational pillars to health, and protect significantly protect your cells from the potential ravages of an unchecked CV onslaught, Fauci, Birx, and Gates never mention them because these things are anathema, detested, and shunned in the context of Vaccination and Ventilators frenzy.

Therefore Fauci, Birx, Gates, and Big Pharma need to be indicted for crimes against humanity. These criminals need to be fully exposed for a lot of serious scientific crimes. Recently, a petition was drafted to indict these people,

and close to fifty thousand people have signed it in 48 hours. Unfortunately, the handcuffed medical professional community is largely facing job lose and medical ostracization if they so much as mention the criminality in all this. Some are coming forward, in spite of the job lose danger, but most are either ignorant of how the immune system actually works, from years of University indoctrination and brainwashing about germs, viruses, and bacterial boogeyman stories, or from the fear of job lose and de-credentialing by Gates and his AMA Criminal Cabal.

--Adapted by Gregory L. Garrett from: https://www.youtube.com/watch?v=FSWYcil0tT4

Dr. Rashid Buttar: Exosomes and Cytokine Storms

Mandated vaccines are on the tick list of the UN sustainable goals. C 19, of course, is a scam and has never been isolated, and therefore, has not been proven to even exist. If you follow the research, what they are actually looking at is Exosomes, not viruses. Then, the effect of Vaccines suddenly makes sense. Check out the effect of the flu shot which makes you 36% more likely to get the flu. Why should that be?

What a Cytokine Storm Means:

Diseases such as C 19 and influenza can be fatal due to an overreaction of the body's immune system called a cytokine storm. Cytokines are small proteins released by many different cells in the body, including those of the immune system where they coordinate the body's response against infection and trigger inflammation. The name 'cytokine' is derived from the Greek words for cell (cyto) and movement (kinos).

Sometimes the body's response to infection can go into overdrive. For example, when SARS -C 19-2 – the virus behind the C 19 pandemic – enters the lungs, it triggers an immune response, attracting immune cells to the region

to attack the virus, resulting in localized inflammation. But in some patients, excessive or uncontrolled levels of cytokines are released which then activate more immune cells, resulting in hyperinflammation. This can seriously harm or even kill the patient.

Cytokine storms are a common complication not only of C 19 and flu but of other respiratory diseases caused by CVes such as SARS and MERS. They are also associated with non-infectious diseases such as multiple sclerosis and pancreatitis.

The phenomenon became more widely known after the 2005 outbreak of the avian H5N1 influenza virus, also known as “bird flu”, when the high fatality rate was linked to an out-of-control cytokine response.

Cytokine storms might explain why some people have a severe reaction to CVes while others only experience mild symptoms. They could also be the reason why younger people are less affected, as their immune systems are less developed and so produce lower levels of inflammation-driving cytokines.

In science and autoimmune come up amazingly fast. So, what we have here is your adaptive immune system being programmed to kill your Innate immune system which of course leaves you wide open to the next infection that comes along.

In short, this vaccine, the work being done right now is an attempt to stop the fast immune reaction which kills quickly, and leave the slow kill, thus people do not work out it was the vaccine that killed them..

Receiving influenza vaccination will increase the risk of other respiratory viruses, a phenomenon known as virus interference.

- **Increased Risk of Non-Influenza Respiratory Virus Infections Associated with Receipt of Inactivated Influenza Vaccine https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3404712/**
- **Influenza Vaccination and Respiratory Virus Interference Among Department of Defense Personnel During the 2017-2018 Influenza Season https://pubmed.ncbi.nlm.nih.gov/31607599/**
- **https://www.newscientist.com/term/cytokine-storm/**

Dr. Dan Erickson And Dr. Massihi Reveal the Real Situation from Accelerated Urgent Care

Dr. Dan Erickson and Dr. Massihi, local doctors from Accelerated Urgent Care in Kern County, gave a report which revealed that from their empirical findings, testing nearly 5000 patients, the mortality rate from C 19ID 9 was so small as to be negligible. They reported less than 0.003% death rate in their district.

However, they also reported many secondary effects from the lockdown can be permanent, especially for children being abused at home. Additionally, they said peoples' mental health is being affected by these C 19 secondary effects, the stress of not having a job, no money, anxiety, depression, panic, and fear, all of which can culminate in illness and even death from a weakened immune system. They stressed staying indoors can severely cripple the immune system, as well as sterilizing too many environments causing an unnatural and compromising effect on the human immune system. They strongly urged that people return to work and stop staying indoors for health sake.

In the state of Virginia, they allegedly had 448 C 19 deaths, mostly due to outbreaks in assisted living and nursing homes. With the population at 8,536,000, the death rate from C 19 in Virginia is 0.0053%. The 2019-2020 flu deaths totaled 1,500, resulting in a 0.018% death rate from the flu, a 339% higher, or nearly 3.5 times the rate of death from C 19, in the same time period. They were adamant that the lockdown will ultimately cause more suffering, death, and destruction, in the long run, than the CV.

Shill Dr. Mike. Interviews Dr. Fauci On C 19

This interview says it all. A Hollywood produced joke of two Eugenics Shills who sound like they never went to grad school, if any of you have and

know the difference. Fauci received over 100 million in shill money from Gates and sounds like a Jesuit Mafia Hit Man, and nothing like an intelligent and sophisticated thinker.

And notice the talking points: All the stuff the Technocrats want to be real, and who is controlling the narrative and all this data?

These two ass clowns are putting on a Jesuit dog and pony show for your so you will like their little high school level interview, and just go along with the reality of a virus that has never even been demonstrated to exist apart from the garden variety CV with pShuttle-SN gene insert for longevity.

How does Doctor Mike land an interview with the top Mafia King Pin, Fauci, btw? You can't see "The Boss" unless you are batting for the United Nations' Eugenics Crusade. How much money are you making for your acting role, Dr. Mike? Ka Ching!!!

We all know that Fauci made 100 million from Gates for his acting role. It pays to sell out, you know.

Look at Dr. Mike and his:

- "Look how fun and happy I stay while millions die!" attitude.
- Love the haircut.
- Love the glasses that are supposed to make him look like he reads nonstop.
- Love the light, disarming gay voice.
- Love the pretty boy face to sell the harmlessness of the Depopulation Agenda.
- Love the fake doctor’s office stage set.

Love the nonstop useless banter between them where they push testing, social distancing, and pat everyone on the head like a good puppy dog for obeying the social distancing and sheltering in place rules.

Can I have a puppy treat, Dr. Mike?

Can I watch as the first 200 million people convulse and bleed out their eyes after receiving the Vaccine, Dr, Fauci???

"We are doing a good job of social distancing, aren't we, Daddy!!!"

Meanwhile, over 235 million are expected to die of starvation, job loss, and homelessness directly attributable to the C 19 knockdowns and social distancing. That is derived from the CDC stats, btw...not my number.

Always remember Gates and Fauci's motto:

"If we have to kill 500 million people to save a few thousand people, we have done our job."

Yeah, when Eugenics is your job, you certainly have done your job, gentlemen.

Incidentally, Fauci has not practiced medicine for over 26 years, btw.

Let that sink in.

Let's hear it for Hollywood produced fake interviews and the rise of the Technocratic Oligarchy!

Hip hip...hoooraaaaaay!!! Hip hip...hoooraaaaaay!!!

*****Dr. Mike sells himself online with such aplomb and medical professionality…another self-professed top-notch professional something…ugh. Dr. Mike is what is called a "Gate Keeper", as is Fauci. They were hired to keep the narrative ball in their court of the Technocratic Elite.**

--https://youtu.be/OfcJecd6jtE

Chemtrail/5G Virus Activation Hypothesis

Another hypothesis surrounding the C 19 Pandemic is that the government has been spraying metallurgical chemicals in the sky (Chemtrails), using nanotechnology, to optimize remote access into the Exosmotic

mechanism of the human immune system. We all know that multiple governments have had a Chemtrail program, spraying Cadmium, Strontium, Barium, and Aluminum into the skies for over 50 years, for various ecological, agricultural, and more sinisterly C 19ert reasons. There is the idea that 5G EMF radiation, anchored and lock onto target via various Chemtrail induced metallurgical molecules at the cellular level of the human body's RNA transcription processes, could be used to activate the human body's production of Exosomes by tricking the body into thinking that it is fighting off a foreign invader. Exosomes, which have been misnamed as viruses, are RNA and protein-containing small vesicles (30–150 nanometers), and are constantly secreted by all cells in culture and in vivo (performed or taking place in a living organism), in both a normal and diseased state.

The Scientific Elite may have devised a system, using RNA transcription algorithms as an access code, which can remotely activate and deactivate RNA Exosmotic reactions in the body via 5G EMF radiation, tricking the body into thinking in is attacking a foreign toxin or bacterial invader. Subsequently, the Exosmotic immune system is falsely kicked into action causing cold and flu like symptoms that severely over tax the body's natural immune response. If this remote 5G activated immune response is prolonged, it can result in pneumonia, leading to eventual respiratory failure, and even death in those with pre-existing health conditions.

The cause of death is an immune system overtaxed, but not virally related at all. An analog would be LUPUS. LUPUS is a long-term autoimmune disease in which the body's immune system becomes hyperactive and attacks normal, healthy tissue, which is treated with Hydroxychloroquine in the form of Plaquenil, quite frequently. Autoimmune means your immune system cannot tell the difference between the foreign invaders and your body's healthy tissues ("auto" means "self") and creates autoantibodies that attack and destroy healthy tissue.

Does that not ring a bell with the way 5G EMF radiation, augmented by metallurgical molecules, tricks your immune system so it cannot tell the

difference between the foreign invaders and your body's healthy tissues? I think my hypothesis is worthy of extensive research.

Additionally, it subsequently would make sense that Hydroxychloroquine has come to the surface in this C 19 debate, given that Hydroxychloroquine is often used in the treatment of LUPUS. This idea of immune system fatigue and failure brought on by the 5G driven, remote algorithmic access of the body's Exosmotic mechanism may come to be the chief player in the Pandemic battle.

Lastly, Elon Musk has created a 42,000 5G Satellite network across the sky, with over 1,000,000 land base reception towers just in America, called Starlink, so we know the 5G infrastructure is very real and up and running. This fortifies my hypothesis even more. Why is all this 5G infrastructure getting fast tracked without testing, and pushed in Wuhan, The Princess Cruise Line, Italy, London, California, and New York etc…right as the C 19 Pandemic is ubiquitous? We have a real correlative event happening between the aforementioned variables, and they cannot be brushed aside anymore.

Chemtrails + 5G EMF Radiation + Immune Compromising Poisonous Vaccines = DEATH

Exosome Activation Through 5G

5G can be used for achieving a narrower beam utilizing higher frequencies for pinpointing a potential target device. Skin, eyes, and mucosal membranes of the nasal passages are the most susceptible receiver areas to the effects of higher frequencies near or in the millimeter waveband.

A Nanotech bioengineered cellular interface serves as an I.D. marker and cell exosome activator. A bio-interface can be locally administered or via general circulatory introduction in conjunction with vaccination depending on purposed requirements.

These can be used for communicating rapid information exchange to electrically stimulate internalized nanotech structures thereby causing cells to

become triggered into a fake immune response releasing exosome which end up causing toxicity especially if a toxic cellular environment is induced via vaccination. The genetic material and visual shape and size of exosomes is identical to a virus because a virus in reality is an exosome.

Flu symptoms are the most common initial result from both over stimulation of the immune system and from rapid toxic loading.

--https://www.facebook.com/jon.lethbridge.7/posts/2477819829148378?hc_location=ufi

Role of Exosomes in Disease Pathology

There is strong evidence to believe that exosomes have merely been misnamed as viruses. This being the case, exosomes can play a role in disease, as well as health.

1) **Immune System Invasion is one of the pathological consequences of exosmotic activation.**
2) **5G can activate exosmotic irregularities.**
3) **Viruses, misnamed, are simply exosomes.**

In addition to their normal function, exosomes are involved in the pathological development and progression of numerous diseases. It has been shown that pathogens have the ability to take advantage of exosome release to infect host cells, by manipulating host derived exosomes to evade the immune system responses. Other diseases involving exosomes include neurodegenerative diseases, liver disease, heart failure and cancer.

Alzheimer's Disease (AD) is a neurodegenerative disease characterized to by amyloid plaque formation in the brain. Evidence shows the involvement

of exosomes in the spread of these amyloid β (Aβ) molecules to other neuronal cells within the brain of the patient. These molecules have been shown to be physically associated with exosomes, further supporting this evidence. Furthermore, Alix (an exosomal marker) had been shown to be enriched in brain sections of AD patients, when compared to healthy control patients where Alix is virtually absent. Parkinson's Disease is another neurodegenerative pathogenesis that has been linked to exosomes. This disease progression has been associated with an increase in aggregation of α-synuclein. In the presence of neuroblastoma exosomes, the aggregation lag time is reduced. Exosomes provide a catalytic environment for α-synuclein aggregation, which is catalyzed by lipids present on the exosomes.

Exosomes were also shown to be involved in the pathogenesis of liver diseases, including hepatocellular carcinoma, viral hepatitis, and liver inflammation. A human hepatoma cell line releases exosomes that, when taken up by hepatocellular carcinoma cells, results in ablation of a protein, TAK1. Loss of TAK1 has been implicated in hepatocarcinogenesis. In viral hepatitis, exosomes are required for the release of Hepatitis C Virus (HCV) from infected cells, HCV envelope proteins are found within exosomes, and viral RNA associated with exosomes can be found in viral hepatitis patients. In the case of liver inflammation, exosomes isolated from mice fed high-fat diets were injected into mice fed a regular diet. This led to the accumulation of activated immature myeloid cells in the liver, causing chronic liver inflammation and promoted obesity-related disorders such as fatty liver disease.

Peripartum cardiomyopathy (PPCM) is a life-threatening disease characterized by sudden onset of heart failure in pregnant women in the last month of pregnancy or the first months after childbirth. Exosomes were shown to play a role in the pathogenesis of PPCM. A prolactin fragment induces the expression of a specific microRNA in endothelial cells, which functions in preventing angiogenesis in these cells. Additionally, the prolactin fragment induces the release of exosomes, which contains this specific microRNA. These exosomes are subsequently absorbed by cardiomyocytes, resulting in decreased metabolic activity and alterations in gene expression, characteristic of PPCM phenotype.

Role of Exosomes in Cancer Progression

Exosomes may play multiple roles in the progression of cancer. They have the ability to manipulate both the local tumor environment, and the systemic environment to support tumor cell growth, dissemination, and early events in metastasis. Exosomes are more frequently released by tumor cells and may facilitate communication within the local microenvironment and the primary tumor].

Now, simply add 5G to exosomotic pathology, and call it C 19, and you have a lot of sick people you can use to claim a Pandemic is happening.

-- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5327461/

David Crowe Challenges the DisC 19ery of The C 19 Virus: Flaws in CV Pandemic Theory

Executive Summary

The world is suffering from a massive delusion based on the belief that a test for RNA2 is a test for a deadly new virus, a virus that has emerged from wild bats or other animals in China, supported by the western assumption that Chinese people will eat anything that moves. If the virus exists, then it should be possible to purify viral particles. From these particles, RNA can be extracted and should match the RNA used in this test. Until this is done it is possible that the RNA comes from another source, which could be the cells of the patient, bacteria, fungi etc. There might be an association with elevated levels of this RNA and illness, but that is not proof that the RNA is from a virus. Without purification and characterization of virus particles, it cannot be accepted that an RNA test is proof that a virus is present. Definitions of important diseases are surprisingly loose, perhaps embarrassingly so.

A couple of symptoms…maybe contact with a previous patient, and a test of unknown accuracy, is all you often need. While the definition of SARS, an earlier CV panic, was self-limiting, the definition of C 19 disease is open-

ended, allowing the imaginary epidemic to grow. Putting aside the existence of the virus, if the C 19 test has a problem with false positives (as all biological tests do) then testing an uninfected population will produce only false-positive tests, and the definition of the disease will allow the epidemic to go on forever. This strange new disease, officially named C 19, has none of its own symptoms. Fever and cough, previously blamed on uncountable viruses and bacteria, as well as environmental contaminants, are most common, as well as abnormal lung images, despite those being found in healthy people.

Yet, despite the fact that only a minority of people tested will test positive (often less than 5%), it is assumed that this disease is easily recognized. If that was truly the case, the majority of people selected for testing by doctors should be positive. The C 19 test is based on PCR, a DNA manufacturing technique. When used as a test it does not produce a positive/negative result, but simply the number of cycles 1 Officially the virus is called SARS-C 19-2 and the disease it is believed to caused, C 19. We will just refer to C 19 for the current virus panic, and SARS for the 2003 panic. 2 Ribonucleic Acid (RNA) is chemically terribly similar to DNA, except that one of the four bases, Thymine, is replaced by Uracil. In function it is hugely different, being created from DNA for a temporary use such as creating a protein molecule or being a messenger.

It is also found in a single strand rather than a double helix. 2 required to detect sufficient material to beat the arbitrary cutoff between positive and negative. If positive means infected and negative means uninfected, then there are cases of people going from infected to uninfected and back to infected again in a couple of days. A lot of people say it is better to be safe than sorry. Better that some people are quarantined who are uninfected than risk a pandemic. But once people test positive, they are likely to be treated, with treatments similar to SARS.

Doctors faced with what they believe is a deadly virus treat for the future, for anticipated symptoms, not for what they see today. This leads to the use of invasive oxygenation, high dose corticosteroids, antiviral drugs and more. In this case, some populations of those diagnosed (e.g. in China) are

older and sicker than the general population and much less able to withstand aggressive treatment. After the SARS panic had subsided doctors reviewed the evidence, and it showed that these treatments were often ineffective, and all had serious side effects, such as persistent neurologic deficit, joint replacements, scarring, pain, and liver disease, as well as higher mortality.

Virus Existence

Scientists are detecting novel RNA in multiple patients with influenza or pneumonia-like conditions, and are assuming that the detection of RNA (which is believed to be wrapped in proteins to form an RNA virus, as CVes are believed to be) is equivalent to isolation of the virus. It is not, and one of the groups of scientists was honest enough to admit this: "we did not perform tests for detecting infectious virus in blood"

But, despite this admission, earlier in the paper they repeatedly referred to the 41 cases (out of 59 similar cases) that tested positive for this RNA as, "41 patients… confirmed to be infected with 2019-nC 19." Another paper quietly admitted that: "our study does not fulfill Koch's postulates" Koch's postulates, first stated by the great German bacteriologist Robert Koch in the late 1800s, are simple logic, and can be stated as:

1) Purify the pathogen (e.g. virus) from many cases with a particular illness.
2) Expose susceptible animals (obviously not humans) to the pathogen.
3) Verify that the same illness is produced.

Some add that you should also re-purify the pathogen, just to be sure that it really is creating the illness. Famous virologist Thomas Rivers stated in a 1936 speech, "It is obvious that Koch's postulates have not been satisfied in viral diseases".

That was a long time ago, but the problem continues. None of the papers referenced in this article have even attempted to purify the virus. And the word 'isolation' has been so debased by virologists it means nothing (e.g. adding impure materials to a cell culture and seeing cell death is 'isolation').

Reference [1] did publish electron micrographs, but it can clearly be seen in the lesser magnified photo, that the particles believed to be C 19 are not purified, as the quantity of material that is cellular is much greater. The paper notes that the photos are from "human airway epithelial cells".

Also consider that the photo included in the article will certainly be the "best" photo, i.e. the one with the greatest number of particles. Lab technicians may be encouraged to spend hours to look around to find the most photogenic image, the one that most looks like pure virus. There is no way to tell that the RNA being used in the C 19 PCR test is found in those particles seen in the electron micrograph, because you cannot see what the contents are, they could be protein, RNA or DNA. There is thus no connection between the test, and the particles, and no proof that the particles are viral.

A similar situation was revealed in March 1997 concerning HIV, when two papers published in the same issue of the journal "Virology" revealed that the vast majority of what had previously been called "pure HIV" was impurities that were clearly not HIV, and the mixture also included micro-vesicles that look very similar to HIV under an electron microscope, but are of cellular origin.

Disease Definition and Testing

Infectious diseases always have a definition, but they are usually not publicized too widely because then they would be open to ridicule. They usually have a "suspect case" category based on symptoms and exposure, and a "confirmed" category that adds some kind of testing. Reference [13] describes a suspect case definition for C 19, derived from WHO definitions for SARS and MERS (Middle East Respiratory Syndrome).

This definition was in effect until January 18, 2020 and required all four of the following criteria:

"Fever, with or without recorded temperature". Note that there is no universal definition of fever, so this may just be the opinion of a physician or

nurse. With SARS a fever was defined as 38C even though normal body temperature is considered to be 37C (98.6F).

"Radiographic evidence of pneumonia". This can occur without illness, as was seen in a 10-year-old boy with no clinical symptoms. He was diagnosed with pneumonia despite this.

- "Low or normal white-cell count or low lymphocyte count".

This is not really a criterion as every healthy person is included. This is also strange because people suffering from an infection normally have elevated white blood cell counts (although they may drop in people dying from an infection).

One of the following three:

1) "No reduction in symptoms after antimicrobial treatment for 3 days". This is a standard indication of a 'viral' pneumonia, i.e. one that does not resolve with antibiotics.
2) "Epidemiologic link to the Huanan Seafood Wholesale Market". This, and the next criterion, create the illusion of an infectious disease, as it prefers the diagnosis of connected cases.
3) "Contact with other patients with similar symptoms".

On January 18th, the last, three-part category was changed to:

- "Travel history to Wuhan"
- "Direct contact with patients from Wuhan who had fever or respiratory symptoms, within 14 days before illness onset"

The big problem is that, in contrast to the definition for SARS, a "confirmed case" of C 19 did not originally require the criteria for a suspect case to be met, but simply a positive RNA test. It did not require any symptoms or evidence of contact with previous cases, illustrating total faith in the PCR technology used in the test. The World Health Organization definition has the same flaw. It was the

fact that the SARS definition required both a reasonable possibility of contact with a previous case, and symptoms, that allowed the epidemic to burn out.

Once everyone was quarantined, contact with an existing case was highly unlikely, testing stopped, and doctors could declare victory. The Chinese eventually woke up and, around February 16th required confirmed cases to meet the requirements for a suspected case, as well as a positive test.

They may have put this new definition into practice earlier because after a massive addition of almost 16,000 confirmed cases on February 12th, the number fell dramatically each day and, by February 18th was under 500 cases, and continued to stay low. But other countries did not learn. Korea, Japan and Italy (and perhaps other countries) have started doing tests on people with no epidemiological link, encouraging people with the vague symptoms that are part of the definition to come to hospital to get checked, and obviously following up with anybody with a connection to them, most of whom will be asymptomatic.

Consequently, in mid to late February, cases in those and other countries started to skyrocket. A New Disease? C 19 is described as a distinct new disease. But it clearly is not. There are no distinctive symptoms, for a start. Reference showed that, among 41 early cases, the only symptoms found in more than half, were fever (98%) and cough (76%). 98% had CT Scan imaging showing problems in both lungs (although it is possible to have shadowing on a CT scan without symptoms). The high percentage of cases with fever and shadowing in both lungs is an artefact of the disease definition, fever and "radiographic evidence of pneumonia" are two of the diagnostic criteria for a probable case. The low rate of people testing positive on the C 19 test is further evidence that there are no obvious symptoms. If there were recognizable symptoms, doctors should have a better than 3-5% chance of guessing who has the virus.

While some of the people may have been tested, without symptoms, because they were on a flight or cruise, countries outside China are encouraging people with the non-specific symptoms of fever and cough to get tested, so increasingly people have symptoms of the flu or pneumonia, but are still testing

negative in high numbers. For example, as of March 9th, Korea had found 7,382 positive cases out of 179,160 people tested (4.1%). In Washington State, where they appear to be reluctant to test anyone, only 1 out of 27 tested by February 24th had tested positive (3.7%).

Perhaps if they had tested all 438 who were then under quarantine, the epidemic would have exploded from 1 to about 16 cases (3.7% of 438). By March 9th, 1,246 tests had been performed in Washington with 136 found positive (11%). Obviously, in neither location can doctors recognize cases clinically. Testing Assuming, for a moment, the existence of a new CV, what would a test tell us, at this stage? Or rather, what does it not tell us?

Without purification and exposing animals to viral particles we do not know if the virus is pathogenic (disease causing). It could be an opportunistic infection (invades unhealthy people with weakened immune systems) or a passenger virus (that is carried along by risky behavior, such as eating an animal carrier of a virus).

We do not know the false positive rate of the test without widespread testing of healthy people far from places where people are being diagnosed with this possible new disease. If the test is 99% accurate, in a city of over 10 million, like Wuhan, there would be about 100,000 false positives (1%). It is easy to generate a false epidemic if you just keep testing like this. And it is worse if you restrict the test to people with symptoms, because then the flaws in the test will not be revealed for longer.

If someone is sick there is no proof that any or all of their symptoms are due to the virus, even if it is present. Some people may be immune, some may have some symptoms caused by the virus, but others caused by the drugs they are given, by pre-existing health conditions, and so on.

We do not know if the people who test negative are infected or not, especially when they show up with similar symptoms. For example, in, out of 59 patients with similar symptoms, only 41 tested positive, but the researchers were clearly not sure whether the remaining 18 were truly uninfected. If they truly are not, they lend weight to C 19 not being the cause of any of the

illnesses, as they had symptoms indistinguishable from the 41 positives. Testing at such an early stage of knowledge is incredibly dangerous. It spreads panic, it can put people on dangerous medications, other circumstances of their treatment can be physically and psychologically damaging (such as intubation and isolation, and even seeing all the doctors and nurses in special suits emphasizing how deathly sick you are).

False Negatives – Big Problem

According to an article in the South China Morning Post [23], Li Yan, head of the diagnostic center at the People's Hospital of Wuhan University, noted on Chinese state TV that because of the multi-step process, an error at any stage could result in an incorrect outcome. This was echoed by reference [26] which noted the possibility of errors in the many steps from the time of specimen collection through processing. Wang Chen, president of the Chinese Academy of Medical Sciences, also on CCTV, said the accuracy is only 30 to 50 percent.

Wang Chen really means, however, that the test only ever produces false negatives, and never false positives. In a paper documenting a cluster of illness and positives tests in a family, this bias is clear, as most patients had more negative tests than positive tests but were considered positive anyway. Patient 1 had 3/11 positive 9 (27%), patient 2 had 5/11 (45%), patient 3 had all 18 negative, patient 4 had 4/14 (29%), patient 5 had 4/17 (24%) and patient 7 was the only with a majority positive (64%).

The only way to decide logically and scientifically is to have a gold standard for presence of the virus, which can only be purification and characterization (identification of the RNA and proteins). Since this has never been accomplished, doctors get to make decisions on the fly, biased towards treating patients as infected.

False Positives – Best Evidence

The first major attempt to define the false positive rate was in a paper describing a new test methodology, but it has a built-in conflict of interest. Clearly, if the false positive rate was high, the authors' aim to "develop and

deploy robust diagnostic methodology for use in public health laboratory settings", would have failed. They did, however, do more than most. They took 297 samples of nasal and throat secretions from biobanks and tested them, only finding "weak initial reactivity" in four samples which, upon retesting, disappeared. The problem with this kind of analysis is that biobank samples may not have been obtained in the same way as samples from live people in an epidemic panic.

The sampling was also not blinded, something that is necessary to eliminate the possibility of unconscious bias (a real problem in medicine). Furthermore, many samples in people believed to be infected are negative, and multiple samples are tested, as described for the family cluster paper. RNA is fragile if not stored carefully, and this would cause false negative results. No information on whether the samples were stored in a way designed to maintain RNA integrity was given. In sum, testing 297 samples could, at best, show that the false positive rate was 1/300, but because multiple samples are often taken in current C 19 test protocols, with any one positive sample over-ruling all the negatives, the false positive rate could be considerably less, as the biobank samples were only tested once.

And, even if this test did have a false positive rate that was extremely low, it is not clear this particular test's false positive rate cannot be extrapolated to any other test design. Even a small false positive rate is critically important. A 99% accurate test would produce 100,000 false positives in a city of 10 million, like Wuhan. And if the number of positives in sampling is around 4% (which it appears to be from early statistics), then 1 out of 4 positives would be false.

Finally, on March 5th, 2020 some Chinese scientists dropped a bombshell. According to their analysis, based on reasonable assumptions for asymptomatic people (e.g. contacts of other cases), "the false-positive rate of positive results was 80.33%". This is based on a mathematical analysis using reasonable assumptions for the actual prevalence of the virus, and the performance of the test. 10 The best case, with the most optimistic assumptions, was still more than 40% false positives.

Positive, Negative, Positive Again – Confusion

Some people have fully reC 19ered from illness blamed on C 19, started to test negative, and then tested positive again. According to a news report patients are not considered cured in China until they no longer have symptoms, have clear lungs, and have two negative C 19 tests. Despite this, 14% of discharged patients in Guangdong Province later tested positive, but with no relapse of symptoms. This is exceedingly difficult to explain if the test is for a virus, much easier to explain if the RNA that the test is looking for is not viral in origin. Later analysis showed similar results in Wuhan, with 5-10% declared to be "reC 19ered" (negative tests after cessation of symptoms) later tested positive, often without symptoms.

Chinese scientists reported that 29 out of 610 patients at a hospital in Wuhan had 3-6 test results that flipped between Negative, Positive, and 'Dubious' (undefined, but probably means a PCR cycle number between positive and negative). One patient, for example had three negative tests interspersed by two positive tests. Others had one test result in each of the three categories. Other confusing test results are listed in Appendix A.

Negative, Negative, Negative

A group of doctors in Marseille, France, working in a very experienced lab, that regularly does testing for respiratory viruses, reported testing 4,084 samples for C 19, using several systems approved for use in Europe, without a single positive [25]. This included 337 people returning from China who were tested twice, and 32 people referred because of suspected infection. It is statistically improbable that this lab was just lucky to not get any C 19 cases, it is more likely that they used more stringent criteria, illustrating that the performance of not just test kits, but labs, with this new test, is completely unknown. Yet, a positive test remains unquestioned in every case.

Preserve the Test

Overall, it seems that test results must be interpreted to preserve the CV theory. No alternative interpretation is allowed. And when there is an

inconsistency, it must be ignored or explained away, often invoking imaginary data. These situations are listed in Appendix C.

Test Experience

A paper from Singapore by doctors and public health officials provides a revealing look at the inner guts of C 19 testing. Hidden away in the supplementary 3 The abstract was eventually withdrawn, but without any explanation, indicating it was a political removal. The original Chinese language article was not retracted by the journal. This may be the first time ever that an abstract alone has been withdrawn. 11 material of reference, where few people will see it, it exposes some important issues with tests:

• The test is not binary (negative/positive) and has an arbitrary cutoff.

• The quantity of RNA does not correlate with illness.

• If negative means uninfected and positive means infected, then people went from infected to uninfected and back again, sometimes several times.

• Results below the cutoff are not shown, and are treated as negative, but if PCR continued past the cutoff and was eventually positive, this would indicate presence of small quantities of the RNA which is supposedly unique to C 19 (i.e. infection).

--https://theinfectiousmyth.com/book/CVPanic.pdf

Jon Rappoport Comments on David Crowe's Assessment of C 19 Virus

Canadian author and independent researcher, David Crowe, has spent several decades analyzing and torpedoing SPECIFICS of conventional medical research. At the deepest level.

I'm talking about, for example, the mainstream claims of disC 19ering new viruses.

Crowe does not lay on vague brushstrokes. He goes to the core of fabrications and exposes them, chapter, and verse.

His new paper, which he continues to update and expand, is: "Flaws in CV Pandemic Theory."

Here I quote from the section of his paper where he takes up the question of disC 19ery---have researchers actually found a new virus which they assert is the cause of a new pandemic, C 19?

At the end of this article, I list the published papers Crowe refers to by number, as he takes apart the very basis of the C 19ID illusion.

David Crowe:

"Scientists are detecting novel RNA in multiple patients with pneumonia-like conditions, and are assuming that the detection of RNA (which is believed to be wrapped in proteins to form an RNA virus, as CVes are believed to be) is equivalent to isolation of the virus. It is not, and one of the groups of scientists was honest enough to admit this":

"'We did not perform tests for detecting infectious virus in blood.'"

"But, despite this admission, earlier in the paper they repeatedly referred to the 41 cases (out of 59 similar cases) that tested positive for this RNA as, '41 patients...confirmed to be infected with 2019-nC 19'."

Another paper quietly admitted that:

"'Our study does not fulfill Koch's postulates.'"

"Koch's postulates, first stated by the great German bacteriologist Robert Koch in the late 1800s, can simply be stated as":

- **Purify the pathogen (e.g. virus) from many cases with a particular**
- **illness.**
- **Expose susceptible animals (obviously not humans) to the pathogen.**

- **Verify that the same illness is produced.**
- **Some add that you should also re-purify the pathogen, just to be sure that it really is creating the illness."**

"Famous virologist Thomas Rivers stated in a 1936 speech, 'It is obvious that Koch's postulates have not been satisfied in viral diseases'. That was a long time ago, but the same problem still continues. None of the papers referenced in this article have even attempted to purify the virus. And the word 'isolation' has been so debased by virologists it means nothing (e.g. adding impure materials to a cell culture and seeing cell death is 'isolation')."

" Zhu N et al. did publish electron [microscope] micrographs, but it can clearly be seen in the lesser magnified photo, that the particles believed to be CV are not purified as the quantity of material that is cellular is much greater. The paper notes that the photos are from 'human airway epithelial cells'. Also consider that the photo included in the article will certainly be the 'best' photo, i.e. the one with the greatest number of particles. Lab technicians may be encouraged to spend hours to look around to find the most photogenic image, the one that most looks like pure virus."

"There is no way to tell that the RNA being used in the new CV PCR test is found in those particles seen under the electron micrograph. There is no connection between the test, and the particles, and no proof that the particles are viral."

"A similar situation was revealed in March 1997 concerning HIV, when two papers published in the same issue of the journal 'Virology' revealed that the vast majority of what had previously been called 'pure HIV' was impurities that were clearly not HIV, and the mixture also included macrovesicles that look very similar to HIV under an electron microscope, but are of cellular origin.".

In a half-sane world, David Crowe's analysis would provoke an open honest discussion and debate among all sorts of scientists and researchers, and the repressed truth would tumble out and be confirmed.

Of course, we do not live in that world.

Instead, we have mistaken-prone researchers and outright liars welcomed into the hallowed pages of medical journals. They are enabled by editors who look the other way.

The consequences, of course, are not merely academic.

A planet can be placed on lockdown.

Do I really need to say this at this late date---without the disC 19ery of an actual disease-causing virus, the whole "pandemic" falls apart. The whole "spreading virus" assertion falls apart. But instead, the whole world is believing Bill Gates, who did not even graduate from college, has zero Virology training, zero medical background, and billions of dollars invested in Vaccines and human tracking devices. See the problem here?

--Jon Rappoport

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***Canadian author and independent researcher, David Crowe, has spent several decades analyzing and torpedoing SPECIFICS of conventional medical research.**

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The CV Hoax is the Mask for Totalitarian 5G Genocide

Whilst the worldwide panic over the CV continues to grow exponentially, along with the draconian measures legislated to contain it, I decided to search for the actual evidence as to whether the official story of the so-called pandemic has any basis in reality; and if it hasn't, what the truth of the matter appears to be, given the available evidence.

What I disC 19ered is damning evidence that Corona is both a hoax and a mask for totalitarian 5G genocide.

Green Light for Wireless Technologies

In May 2006, the World Health Organization issued a statement regarding the safety of 'electromagnetic fields', including those required for wireless technology:

Considering the exceptionally low exposure levels and research results collected to date, there is no convincing scientific evidence that the weak RF signals from base stations and wireless networks cause adverse health effects.

This resulted in governments across the world giving the green light to the initial roll-out of wireless technologies, relying upon the WHO's rejection of concerns about the potential dangers of microwave radiation.

Safety Concerns Fall on Deaf Ears

Five years later, after the Lancet published an article on the carcinogenicity of radiofrequency electromagnetic fields, the WHO shifted its position, stating that wireless radiation was reclassified as a Class 2B Possible Human Carcinogen in 2011, based on credible evidence that linked long term wireless exposure to brain cancer.

In spite of the growing evidence of the potentially fatal dangers of wireless radiation, the roll-out of the wireless industry still ensued right across the world. However, the WHO could have stopped it all by declaring a moratorium until further notice as soon as they reclassified wireless radiation as a potential cause of brain tumors.

The fact that they failed to do so is enough to condemn the UN institution as not being fit for purpose, as well as potentially liable to charges of having committed acts ancillary to genocide.

Wireless Addiction

This grave situation has been exacerbated by the public's inevitable addiction to wireless devices with ever-faster connection speeds, which significantly contributed to the wireless industry securing lucrative government commitments to roll out 5th generation networks at the earliest opportunity.

Naturally, this was destined to occur without serious investigation into the now well-established deleterious health effects of wireless radiation and without any form of protestation from the World Health Organization.

Appeal by Scientists

Nevertheless, on the 17th of September 2017, 180 scientists from 70 countries, appealed for a moratorium on the 5G Roll-Out, giving the following reasons:

5G technology is effective only over short distance. It is poorly transmitted through solid material. Many new antennas will be required, and full-scale implementation will result in antennas every 10 to 12 houses in urban areas, thus massively increasing mandatory exposure.

With" the ever more extensive use of wireless technologies," nobody can avoid being exposed. Because on top of the increased number of 5G-transmitters (even within housing, shops and in hospitals) according to estimates, "10 to 20 billion connections" (to refrigerators, washing machines, surveillance cameras, self-driving cars and buses, etc.) will be parts of the

Internet of Things. All these together can cause a substantial increase in the total, long term RF-EMF exposure to all EU citizens.

Harmful effects of RF-EMF exposure are already proven. More than 230 scientists from 41 countries have expressed their "serious concerns" regarding the ubiquitous and increasing exposure to EMF generated by electric and wireless devices already before the additional 5G roll-out. They refer to the fact that" numerous recent scientific publications have shown that EMF affects living organisms at levels well below most international and national guidelines". Effects include increased cancer risk, cellular stress, increase in harmful free radicals, genetic damages, structural and functional changes of the reproductive system, learning and memory deficits, neurological disorders, and negative impacts on general well-being in humans. Damage goes well beyond the human race, as there is growing evidence of harmful effects to both plants and animals.

After the scientists' appeal was written in 2015 additional research has convincingly confirmed serious health risks from RF-EMF fields from wireless technology. The world's largest study (25 million US dollar) National Toxicology Program (NTP), shows statistically significant increase in the incidence of brain and heart cancer in animals exposed to EMF below the ICNIRP (International Commission on Non-Ionizing Radiation Protection) guidelines followed by most countries. These results support results in human epidemiological studies on RF radiation and brain tumor risk. A large number of peer-reviewed scientific reports demonstrate harm to human health from EMFs.

The International Agency for Research on Cancer (IARC), the cancer agency of the World Health Organization (WHO), in 2011 concluded that EMFs of frequencies 30 KHz – 300 GHz are possibly carcinogenic to humans (Group 2B). However, new studies like the NTP study mentioned above and several epidemiological investigations including the latest studies on mobile phone use and brain cancer risks confirm that RF-EMF radiation is carcinogenic to humans.

The EUROPA EM-EMF Guideline 2016 states that ”there is strong evidence that long-term exposure to certain EMFs is a risk factor for diseases such as certain cancers, Alzheimer's disease, and male infertility…Common EHS (electromagnetic hypersensitivity) symptoms include headaches, concentration difficulties, sleep problems, depression, lack of energy, fatigue, and flu-like symptoms."

An increasing part of the European population is affected by ill health symptoms that have for many years been linked to exposure to EMF and wireless radiation in the scientific literature. The International Scientific Declaration on EHS & multiple chemical sensitivity (MCS), Brussels 2015, declares that: "In view of our present scientific knowledge, we thereby stress all national and international bodies and institutions…to recognize EHS and MCS as true medical conditions which acting as sentinel diseases may create a major public health concern in years to come worldwide i.e. in all the countries implementing unrestricted use of electromagnetic field-based wireless technologies and marketed chemical substances… Inaction is a cost to society and is not an option anymore… we unanimously acknowledge this serious hazard to public health…that major primary prevention measures are adopted and prioritized, to face this worldwide pan-epidemic in perspective."

Virus Pandemic Prediction

As if the evidence against them was not already compelling, not only did the WHO declare that the outbreak of a deadly viral pandemic was inevitable in mid-2019, the organization it founded and controls, the Global Preparedness Monitoring Board [GPMB], issued a comprehensive report on the subject, entitled 'A World At Risk', last September, which stated that:

"The threat of a pandemic spreading around the globe is a real one… A quick-moving pathogen has the potential to kill tens of millions of people, disrupt economies and destabilize national security…. The threat of a rapidly moving, highly lethal pandemic of a respiratory pathogen' is 'very real'. This could kill between 50,000,000 to 80,000,000 people and wipe out nearly five per cent of the world's economy."

In effect, the WHO predicted with certainty that a devastating pandemic would kill 50-80 million people in the near future and cause massive losses to the world's economy, during the very period ear-marked for the international roll-out of 5G.

China Switches On 5G Network

On the last day of October 2019, the most advanced and intrusive 5G network was enabled in an estimated 20% of China, including Wuhan, the location of a well-known laboratory of the Chinese government, where biological weapons are openly developed and tested on the Chinese people.

Furthermore, it has been reported by a former senior medical adviser to the Chinese government that the latter was well aware of outbreaks of the heavy flu-like symptoms, which just so happen to correspond with the symptoms of non-ionizing radiation poisoning from microwave technologies.

It is also claimed this was known by early to mid-November 2019, following 5G going 'live' in China.

China Shuts Down

However, the Chinese government chose to keep that information to themselves until January 2020, when it was alleged the CV Pandemic began in Wuhan last month, supposedly because the produce at a local seafood market was infected with it.

Later, it was claimed that the pandemic began in December. Either way, the facts simply don't stack up the way they are being presented in the media.

Shortly afterwards, the Chinese government announced to the world that the country had been brought to standstill by Corona [including its vast manufacturing industry].

They had already quarantined vast numbers of the population, many of whom have since been welded into their homes indefinitely by the totalitarian communist dictatorship, which was originally founded with money from the

House of Rothschild, just like the United Nations and all of its tentacles, necessarily including the World Health Organization.

Tyrannous Objectives

It naturally follows that the Chinese government has almost certainly taken this course of action in order to achieve the following tyrannous objectives:

1. To promote the viral pandemic myth predicted by the WHO, thereby preventing the people from realizing that it is 5G radiation poisoning that is making everybody ill, not the CV.

2. To shut down China's vast slave labor manufacturing industries, upon which almost every large corporation worldwide relies for cheap imports, with the intention of wiping out the 5% of the world's economy, as predicted by the WHO.

3. To use Corona as an excuse to impose yet more draconian tyranny upon the Chinese people, in a truly terrifying display of unaccountable government power, as a warning clearly intended to convince its serfs that resistance is futile.

4. To use it as a pretext to shut down the freedom and democracy protests which had been raging every day on the streets of Hong Kong [and elsewhere in china] for almost six months, when the Chinese 5G roll-out began.

5. To cull as many of Kissinger's 'useless eaters' as possible, by imprisoning the people in a virtual, invisible and deadly 5G cage, under 24/7 total surveillance.

6. To justify legislation which makes vaccinations compulsory [and annual] in every UN member state, thereby maximizing the profits of Big Pharma, which was also financed with Rothschild money.

Dow Jones Crashes

Right on cue, with the entire Chinese manufacturing industry having been shut down for the purported purpose of containing the CV, the Dow Jones index plunged 1190 points on 27/02/2020 – the largest drop in history to have occurred in a single day.

This represented an estimated loss of more than 4% of the value of the stocks at the beginning of the day's trading, less than 1% from the 5% predicted by the WHO, as the level of loss the world's economy would be exposed to because of the pandemic they also suspiciously predicted.

5G and Corona Arrive in the UK

I happen to live in one of the UK cities where the 5G network went live in late December 2019, since when virtually everybody I know who lives and works within the range of the local mast, has been complaining of the heavy flu-like symptoms of microwave radiation poisoning, which they are finding very difficult to shake off.

Since this occurred several weeks before the first reported case of CV in Britain, it simply cannot be sensibly claimed that these people contracted it.

However, it certainly can be said that they are displaying all the symptoms of being slowly cooked by non-ionizing microwave radiation, according to all the very latest peer-reviewed scientific research.

Emergency UK Legislation Is Unconstitutional

In spite of Brexit, the UK government, using the reaffirmed power of British sovereignty, has already laid before Parliament regulations which purports to grant the police the right to use force to arbitrarily arrest, medicate and detain indefinitely, any person suspected by a government appointed medical officer of having any potentially threatening virus, without any evidence threshold being met, without the judgment of a court and without the right of appeal.

For the same reasons Brexit could not happen without a mandate from the people, Parliament does not have the authority to do anything that derogates from the sovereignty restored by the Final Brexit Bill, which

prohibits any minister of the crown from doing so under the transition period rules it laid down.

Moreover, since it is well established that Parliamentary sovereignty always reverts back to the people every time a government is dissolved, no enactment which restricts the constitutional rights to come and go as we please, be presumed innocent until proven guilty and to exercise lawful excuse to refuse to obey any order or law we consider unjust, is lawful without a democratic mandate, under the supreme and guiding principles of the Common Law Brexit restored on the 31st of January.

Last Chance to Stop 5G Genocide

A class action to strike out the aforementioned instrument would be the remedy of last resort, in the event Johnson's government are shilling for the UN and have secretly committed to reducing the population of these islands by up to 85%, in accordance with UN Agendas 21 and 30, instead of restoring the supremacy of Common Law, which expressly prohibits such regulations becoming legally enforceable.

However, my gut tells me that there is at least a chance that Dominic Cummings, the Whitehall revolutionary who masterminded Britain's exit from the EU, will convince Johnson that the CV is a mask for totalitarian genocide, which he is duty bound to expose to the world.

For any prime minister to knowingly continue down the road he is currently persuaded to hurtle, after being presented with such overwhelming evidence of the detrimental health effects of wireless technology, would comprise nothing less than an act of genocide, under the international convention on the prevention of such crimes.

--https://www.thebernician.net/corona-virus-hoax-the-mask-for-5g-genocide/

CV Could Be a 'Chimera' of Two Different Viruses, Genome Analysis Suggests

In the space of a few weeks, we have all learned a lot about C 19 and the virus that causes it: SARS-C 19-2. But there have also been a lot of rumors.

And while the number of scientific articles on this virus is increasing, there are still many grey areas as to its origins.

In which animal species did it occur? A bat, a pangolin, or another wild species? Where does it come from? From a cave or a forest in the Chinese province of Hubei, or elsewhere?

In December 2019, 27 of the first 41 people hospitalized (66 percent) passed through a market located in the heart of Wuhan city in Hubei province. But, according to a study conducted at Wuhan Hospital, the very first human case identified did not frequent this market.

Instead, a molecular dating estimate based on the SARS-C 19-2 genomic sequences indicates an origin in November. This raises questions about the link between this C 19 epidemic and wildlife.

Genomic Data

The SARS-C 19-2 genome was rapidly sequenced by Chinese researchers. It is an RNA molecule of about 30,000 bases containing 15 genes, including the S gene which codes for a protein located on the surface of the viral envelope (for comparison, our genome is in the form of a double helix of DNA about 3 billion bases in size and contains about 30,000 genes).

Comparative genomic analyses have shown that SARS-C 19-2 belongs to the group of Beta-CVes and that it is very close to SARS-C 19, responsible for an epidemic of acute pneumonia which appeared in November 2002 in the Chinese province of Guangdong and then spread to 29 countries in 2003.

A total of 8,098 cases were recorded, including 774 deaths. It is known that bats of the genus Rhinolophus (potentially several cave species) were the reservoir of this virus and that a small carnivore, the palm civet (Paguma larvata), may have served as an intermediate host between bats and the first human cases.

Since then, many Beta-CVes have been disC 19ered, mainly in bats, but also in humans. For example, RaTG13, isolated from a bat of the species Rhinolophus affinis collected in China's Wuhan Province, has recently been described as terribly similar to SARS-C 19-2, with genome sequences identical to 96 percent.

These results indicate that bats, and in particular species of the genus Rhinolophus, constitute the reservoir of the SARS-C 19 and SARS-C 19-2 viruses.

But how do you define a reservoir? A reservoir is one or several animal species that are not or not extremely sensitive to the virus, which will naturally host one or several viruses.

The absence of symptoms of the disease is explained by the effectiveness of their immune system, which allows them to fight against too much viral proliferation.

Recombination Mechanism

On 7 February 2020, we learned that a virus even closer to SARS-C 19-2 had been disC 19ered in pangolin. With 99 percent of genomic concordance reported, this suggested a more likely reservoir than bats.

However, a recent study under review shows that the genome of the CV isolated from the Malaysian pangolin (Manis javanica) is less similar to SARS-C 19-2, with only 90 percent of genomic concordance. This would indicate that the virus isolated in the pangolin is not responsible for the C 19 epidemic currently raging.

However, the CV isolated from pangolin is similar at 99 percent in a specific region of the S protein, which corresponds to the 74 amino acids

involved in the ACE (Angiotensin Converting Enzyme 2) receptor binding domain, the one that allows the virus to enter human cells to infect them.

By contrast, the virus RaTG13 isolated from bat R. affinis is highly divergent in this specific region (only 77 percent of similarity). This means that the CV isolated from pangolin is capable of entering human cells whereas the one isolated from bat R. affinis is not.

In addition, these genomic comparisons suggest that the SARS-C 19-2 virus is the result of a recombination between two different viruses, one close to RaTG13 and the other closer to the pangolin virus. In other words, it is a chimera between two pre-existing viruses.

This recombination mechanism had already been described in CVes, in particular to explain the origin of SARS-C 19. It is important to know that recombination results in a new virus potentially capable of infecting a new host species.

For recombination to occur, the two divergent viruses must have infected the same organism simultaneously.

Two questions remain unanswered: in which organism did this recombination occur? (a bat, a pangolin, or another species?) And above all, under what conditions did this recombination take place?

--Alexandre Hassanin, Maître de Conférences (HDR) à Sorbonne Université, ISYEB - Institut de Systématique, Evolution, Biodiversité (CNRS, MNHN, SU, EPHE, UA), Muséum national d'histoire naturelle (MNHN).

https://www.sciencealert.com/genome-analysis-of-the-CV-suggests-two-viruses-may-have-combined

Social Distancing: The Rationale, The Insanity

"Where are the kids?"

"They went out for a walk."

"Call the drone patrol."

Night in the city. Empty streets. A few masked pod people, wearing holstered spray bottles of disinfectants, wander subway platforms looking for the monster C 19ID...

For the purposes of this article, I'm going to assume a unique and new virus, C 19, was actually disC 19ered.

I do not agree it was, but let's take a quick jaunt into the fun house with the CDC/WHO loons, whose logic went the way of the dodo bird many moons ago. They eat the fear they provoke. That is all they have got.

How about an obvious strategy: make people immune as quickly as possible? No lockdowns, no social distancing, no self-isolation. Expose everyone to the virus.

Naturally. Not via a vaccine.

In the old days, parents would hold parties for their children at the house of a child who had developed measles. Let the kiddies get the red spots and be done with it. Make them immune. Of course, this accrued zero profit to pharma. Therefore, the idea had to be discredited, and abandoned as too dangerous. Must have a vaccine.

Ah, but C 19 is another story, right. It's deadly.

Really?

Read my previous articles on Italy, for example. Their National Institute of Health, reviewing patient records carefully, determined that the overwhelming percentage of people dying who "had the virus," were not dying FROM the virus, but from prior serious medical conditions. Their average age? 79.5. This is called a clue.

If you take the conventional medical view---again, entering their world for a minute---epidemics reach a peak and then burn out and disappear. Unless

you actually sustain them by keeping people away from the virus. Unless you keep them at a distance from each other.

Of course, if you really want to support complete medical insanity, you will declare national lockdowns every year when the flu arrives. In a recent typical year, Italy reports about five million cases of the flu. So isolate everyone and shut down the nation. Ditto for many other countries.

Bring the whole planet to a halt.

And at those brief periods when you'd want to open up civilization, you could switch your attention to, say, pneumonia, another universal disease, and claim it prevented you from letting people out of their houses. In which case, keep the planet locked down, force everyone to live at home forever, and ultimately kill off the whole population.

This brings us to the matter of the human immune system and the trillions to the trillionth power of viruses that roam and inhabit Earth. The immune system does quite well, on its own. If it didn't, we'd all be dead, many times over.

Big Pharma's strategy is:

1) Reject the natural immune system.
2) Demand toxic vaccines to match every possible germ.
3) Rig case numbers to make it appear the germs are winning, along every front.
4) Saturate media with stories about medical conditions and train people to fear disease.

Pharma claims: there are many people whose immune systems are weak, and we must protect them by vaccinating everyone.

Newsflash: a person with a weakened immune system is going to become sick, no matter how physicians intervene to prevent it. The names of germs don't matter. The only answer is, try to strengthen weak immunity in natural, non-medical ways. Because, if you don't, these people WILL become ill. Among the MANY reasons? Toxic medical treatments, for instance, will

definitely make them ill. Do a little research on your own. Public health agencies, and even vaccine manufacturers, in their literature, admit that a contraindication for vaccination, is weakened immune system. But this fact does not stop them from vaccinating millions of people in Third World countries who are already immunocompromised to the edge of a cliff.

That is another clue. It tells you something about the "humanity" of drug companies.

People in modern societies have a strange attitude about death. I would call it a selective attitude. On the one hand, they watch untold numbers of TV shows---both fact and fiction---that involve death. They know people die. They register mild reactions. But on the other hand, when public health agents broadcast three sentences about a virus and death, these same people fold up. They salute. They fall to their knees and plead for help. You could tell them that, according to the CDC, somewhere in the vicinity of 40,000 people in the US die every year from the flu, and you could keep repeating that over and over until you're blue in the face, and you'd get zero response. Nothing. But if a media flack for the CDC goes on television and says 50 people in China have died from a new virus, these no-reaction people would stop what they are doing and go shop for extra water and flamethrowers. It is magic. Bad magic.

To use a highly technical term, it is bullshit.

After an exceptionally large protest against the lockdowns in Harrisburg, Pennsylvania, the other day, a public health expert predicted a rise in the number of C 19 cases, because the crowd ignored social distancing. I, on the other hand, predict a rise in the amount of crapola science and preposterous computer modeling.

"The kids went outside when we told them not to. What do we do?"

"We were going to let them out after three weeks. Let's make it a month. That'll teach them a lesson."

"Good. Where can we publish our decision?"

"I suggest the New England Journal. I'm sure they'll be interested if we dress up the language."

"A new computer model?"

"You bet."

"Where will we find it?"

"You're kidding, right? I have six on my laptop. For all occasions. Give me a minute. I'll find the most frightening one."

"Has the sun gone down yet? Can I climb out of my coffin? Can I change into my tuxedo and cape?"

--Jon Rappoport

5G, Cytokine Storms, and the Immune System

"Cytokines are a broad and loose category of small proteins (~5–20 kDa) important in cell signaling. Cytokines are peptides and cannot cross the lipid bilayer of cells to enter the cytoplasm. Cytokines have been shown to be involved in autocrine, paracrine, and endocrine signaling as immunomodulating agents.

They are important in health and disease, specifically in host immune responses to infection, inflammation, trauma, sepsis, cancer, and reproduction." Wikipedia

Now, if you add 5G EMF Radiation to a compromised immune system, you may end up with Cytokine Storms. A Cytokine storm is an overproduction of immune cells and their activating compounds (cytokines), which, in a flu infection, is often associated with a surge of activated immune cells into the lungs, resulting in "Drop Dead Syndrome". What does a Cytokine Storm feel like? The primary symptoms of a Cytokine Storm are high fever, swelling and redness,

extreme fatigue, and nausea. In some cases, the immune reaction may be fatal.

Rising Storm

When the cytokines that raise immune activity become too abundant, the immune system may not be able to stop itself. Immune cells spread beyond infected body parts and start attacking healthy tissues, gobbling up red and white blood cells and damaging the liver. Blood vessel walls open up to let immune cells into surrounding tissues, but the vessels get so leaky that the lungs may fill with fluid, and blood pressure drops. Blood clots throughout the body, further choking blood flow. When organs don't get enough blood, a person can go into shock, risking permanent organ damage or death.

Most patients experiencing a storm will have a fever, and about half will have some sort of nervous system symptoms, such as headache, seizures or even coma, says Randy Cron, a pediatric rheumatologist and immunologist at the University of Alabama at Birmingham and co-editor of the 2019 textbook Cytokine Storm Syndrome. "They tend to be sicker than you expect," he says.

Doctors are only now coming to understand cytokine storms and how to treat them, he adds. Though there's no fail-safe diagnostic test, there are signs that a storm may be underway. For example, blood levels of the protein ferritin may rise, as may blood concentrations of the inflammation indicator C-reactive protein, which is made by the liver.

Cytokine storm in C 19

The first hints that severe C 19 cases included a cytokine storm came out of Chinese hospitals near the outbreak's epicenter. Physicians in Wuhan, in a study of 29 patients, reported that higher levels of the cytokines IL-2R and IL-6 were found in more severe C 19 infections.

IL-6 was also an early indicator of a cytokine storm-like condition in an 11-patient analysis by physicians in Guangdong. Another team, analyzing 150 cases in Wuhan, found that an array of molecular indicators for a cytokine

storm — including IL-6, CRP, and ferritin — were higher in those who died than in those who survived.

And immunologists in Hefei reported similar results among patients who died, as well as high levels of active, damaging immune cells spewing dangerous cytokines in the blood of C 19 patients who required intensive care.

Cytokine storms are also raging among US patients. "I've seen plenty of it," says Roberto Caricchio, chief of rheumatology at Temple University in Philadelphia. Precise data are not in yet, but he says that a "sizable fraction" — perhaps 20 to 30 percent — of patients with severe cases and lung symptoms have signs of a cytokine storm.

--https://www.knowablemagazine.org/article/health-disease/2020/what-cytokine-storm

Possible Symptoms of C 19

Symptoms that may, theoretically, appear ensuing 2-14 days of incubation after exposure to the virus:

1) Fever
2) Cough
3) Shortness of breath or difficulty breathing
4) Chills
5) Repeated shaking with chills
6) Muscle pain
7) Headache
8) Sore throat
9) New loss of taste or smell
10) Trouble breathing
11) Persistent pain or pressure in the chest
12) New confusion or inability to arouse
13) Bluish lips or face

POTENTIAL TREATMENTS OF C 19 (i.e. 5G and Pollution Exacerbated CV)

Could Chloroquine Help Fight the Novel CV?

Chloroquine might be getting new life as an antiviral treatment for the novel CV that emerged in Wuhan, China in late 2019 and has infected some 25,000 people in more than 25 countries. For decades, the drug was a front-line treatment and prophylactic for malaria.

Though the paper is brief, John Lednicky, a professor at the University of Florida's Emerging Pathogens Institute, found its results intriguing. "It's interesting in that it really lacks a lot of details but, nevertheless, if you look at the data as presented, at least in vitro, it seems like chloroquine can be used as an early-stage drug," he said. "It would be very good if these types of experiments were repeated by more laboratories to see whether the same results occur across the board."

Chloroquine is a synthetic form of quinine, a compound found in the bark of cinchona trees native to Peru and used for centuries to treat malaria. Chloroquine was an essential element of mass drug administration campaigns to combat malaria throughout the second half of the 20th century and remains one of the World Health Organization's essential medicines. However, after the malaria parasites Plasmodium falciparum and Plasmodium vivax began exhibiting resistance to the drug in the 1960s and 1980s, respectively, it was replaced by similar antimalarial compounds and combination therapies.

Chloroquine is still widely used against the three other species of plasmodium and to treat autoimmune disorders and some cases of amebiasis, an intestinal infection caused by the amoeba Entamoeba histolytica.

Chloroquine's antiviral properties were explored in the mid-1990s against HIV and in the following decade against severe acute respiratory

syndrome, or SARS, which is closely related to the novel CV. In 2004, researchers in Belgium found that chloroquine inhibited replication of SARS in cell culture.

The following year, however, another team at Utah State University and the Chinese University of Hong Kong evaluated a gamut of compounds against SARS replication in mice infected with the virus, finding that chloroquine was only effective as an anti-inflammatory agent. They recommended that it could be used in combination with compounds that prevent replication. Nevertheless, in 2009, the Belgian group found that lethal infections of human CV OC43, a relative of SARS, could be averted in newborn mice by administering chloroquine through the mother's milk.

Chloroquine raises the pH in host-cell lysosomes, which interferes with viruses' attempts to acidify the lysosomes, a prerequisite to formation of the autophagosomes that cells use to eat themselves. In the Cell Research paper, the researchers found that the drug was effective at inhibiting the virus as it was both entering and exiting cells.

Craig Cameron is a virologist at the University of North at Chapel Hill. "There is mounting evidence that many viruses hijack this cellular autophagy pathway for the good of the virus, but it is not completely clear why," he said.

The second compound, **Remdesivir**, is a nucleoside analog disC 19ered in 2016 that inhibits viral polymerase activity, shutting down transcription and synthesis of viral RNA. This gives it antiviral activity against a broad range of retroviruses, including Ebola (for which the drug maker Gilead developed and tested it, unsuccessfully, during the 2018-2020 epidemic in the Democratic Republic of the Congo) and CVes.

"The fact that this drug works against this virus is not unexpected, especially in vitro," Cameron said. "Accumulation in the lungs to a level that is effective is likely the bigger issue as a therapeutic for humans."

This is a molecular illustration of a 2019 novel CV comparative model.

The Wuhan Institute of Virology submitted a patent Jan. 21 for the use of Remdesivir to fight the new CV in China; this may set up a battle with Gilead over intellectual property rights. In their filing, the institute noted that they did not apply to patent chloroquine phosphate because it has been marketed in China and has an extant supply chain.

Lednicky is optimistic about the prospects for treating the new CV with Remdesivir and chloroquine.

"What's important is that the selectivity index is relatively high for both of them," Lednicky said. "In other words, they're not expected to have a lot of side effects."

The biggest question regarding chloroquine he said, is at how many days into an infection it can be effectively administered to someone sick with the new CV.

"As an analogy, Tamiflu works very well against susceptible influenza A virus strains as long as you take it early enough," he said. "And that's what we have to determine with chloroquine, whether it can be used when somebody has been sick for more than a few days. But the indication so far, based on this paper and past work with SARS, is that it might be a useful drug."

--https://www.asbmb.org/asbmb-today/science/020620/could-an-old-malaria-drug-help-fight-the-new-coron

Chloroquine is a Zinc Ionophore

Ionophore

An Ionophore is any substance which is able to transport particular ions across a lipid membrane in a cell. (e.g. Zinc or calcium ionophores.)

Chloroquine is an established antimalarial agent that has been recently tested in clinical trials for its anticancer activity. The favorable effect of chloroquine appears to be due to its ability to sensitize cancerous cells to chemotherapy, radiation therapy, and induce apoptosis. The present study

investigated the interaction of zinc ions with chloroquine in a human ovarian cancer cell line (A2780).

Chloroquine enhanced zinc uptake by A2780 cells in a concentration-dependent manner, as assayed using a fluorescent zinc probe. This enhancement was attenuated by TPEN, a high affinity metal-binding compound, indicating the specificity of the zinc uptake. Furthermore, addition of copper or iron ions had no effect on chloroquine-induced zinc uptake. Fluorescent microscopic examination of intracellular zinc distribution demonstrated that free zinc ions are more concentrated in the lysosomes after addition of chloroquine, which is consistent with previous reports showing that chloroquine inhibits lysosome function. The combination of chloroquine with zinc enhanced chloroquine's cytotoxicity and induced apoptosis in A2780 cells. Cytotoxicity is the quality of being toxic to cells. Examples of toxic agents are an immune cell or some types of venom.

Thus, chloroquine is a zinc ionophore, a property that may contribute to chloroquine's anticancer and subsequent antiviral activity.

The Role of Zinc in Antiviral Immunity

Abstract

Zinc is an essential trace element that is crucial for growth, development, and the maintenance of immune function. Its influence reaches all organs and cell types, representing an integral component of approximately 10% of the human proteome, and encompassing hundreds of key enzymes and transcription factors. Zinc deficiency is strikingly common, affecting up to a quarter of the population in developing countries, but also affecting distinct populations in the developed world as a result of lifestyle, age, and disease-mediated factors.

Consequently, zinc status is a critical factor that can influence antiviral immunity, particularly as zinc-deficient populations are often most at risk of

acquiring viral infections such as HIV or hepatitis C virus. This review summarizes current basic science and clinical evidence examining zinc as a direct antiviral, as well as a stimulant of antiviral immunity. An abundance of evidence has accumulated over the past 50 y to demonstrate the antiviral activity of zinc against a variety of viruses, and via numerous mechanisms. The therapeutic use of zinc for viral infections such as herpes simplex virus and the common cold has stemmed from these findings; however, there remains much to be learned regarding the antiviral mechanisms and clinical benefit of zinc supplementation as a preventative and therapeutic treatment for viral infections.

--https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6628855/

Hydroxychloroquine and Remdesivir Effective in Inhibiting SARS-C 19-2 Infection In Vitro

Hydroxychloroquine, a less toxic derivative of chloroquine, is effective in inhibiting SARS-C 19-2 infection in vitro. In vitro studies are performed with microorganisms, cells, or biological molecules outside their normal biological context. Colloquially called "test-tube experiments", these studies in biology and its subdisciplines are traditionally done in labware such as test tubes, flasks, Petri dishes, and microtiter plates.

The outbreak of CV disease 2019 (C 19) allegedly caused by the severe acute respiratory syndrome CV 2 (SARS-C 19-2/2019-nC 19) poses a serious threat to global public health and local economies. As of March 3, 2020, over 80,000 cases have been confirmed in China, including 2946 deaths as well as over 10,566 confirmed cases in 72 other countries. Such huge numbers of infected and dead people call for an urgent demand of effective, available, and affordable drugs to control and diminish the epidemic.

Remdesivir

Remdesivir is an antiviral medication developed by the American biopharmaceutical company Gilead Sciences. It is a nucleotide analog,

specifically an adenosine analogue, which inserts into viral RNA chains, causing their premature termination.

We have recently reported that two drugs, Remdesivir (GS-5734) and chloroquine (CQ) phosphate, efficiently inhibited SARS-C 19-2 infection in vitro. Remdesivir is a nucleoside analog prodrug developed by Gilead Sciences (USA). A recent case report showed that treatment with Remdesivir improved the clinical condition of the first patient infected by SARS-C 19-2 in the United States2, and a phase III clinical trial of Remdesivir against SARS-C 19-2 was launched in Wuhan on February 4, 2020.

However, as an experimental drug, Remdesivir is not expected to be largely available for treating an exceptionally large number of patients in a timely manner. Therefore, of the two potential drugs, CQ appears to be the drug of choice for large-scale use due to its availability, proven safety record, and a relatively low cost. In light of the preliminary clinical data, CQ has been added to the list of trial drugs in the Guidelines for the Diagnosis and Treatment of C 19 (sixth edition) published by National Health Commission of the People's Republic of China.

CQ (N4-(7-Chloro-4-quinolinyl)-N1, N1-diethyl-1,4-pentanediamine) has long been used to treat malaria and amebiasis. However, Plasmodium falciparum developed widespread resistance to it, and with the development of new antimalarials, it has become a choice for the prophylaxis of malaria. In addition, an overdose of CQ can cause acute poisoning and death3. In the past years, due to infrequent utilization of CQ in clinical practice, its production and market supply was greatly reduced, at least in China.

Hydroxychloroquine (HCQ) sulfate, a derivative of CQ, was first synthesized in 1946 by introducing a hydroxyl group into CQ and was demonstrated to be much less (~40%) toxic than CQ in animals4. More importantly, HCQ is still widely available to treat autoimmune diseases, such as systemic lupus erythematosus and rheumatoid arthritis. Since CQ and HCQ share similar chemical structures and mechanisms of acting as a weak base and immunomodulator, it is easy to conjure up the idea that HCQ may be a potent candidate to treat infection by SARS-C 19-2. Actually, as of February 23, 2020,

seven clinical trial registries were found in Chinese Clinical Trial Registry (http://www.chictr.org.cn) for using HCQ to treat C 19. Whether HCQ is as efficacious as CQ in treating SARS-C 19-2 infection still lacks the experimental evidence.

--https://www.nature.com/articles/s41421-020-0156-0

The Combination Hydroxychloroquine and Zinc

Hydroxychloroquine is a well-tested Malaria and Lupus Medication, so it needs no further testing. It can be taken for years with little or no adverse effects. And so, it can be released to the public immediately. And as far as Zinc is concerned, it is an essential mineral, and so, perfectly safe.

Hydroxychloroquine, ostensibly, provides a transport mechanism for Zinc to get inside infected cells to destroy the common CV, along with Vitamin C and D active immune support. Puy another way, Hydroxychloroquine enters the exosmotic area in the intracellular region to deactivate the CV's ability to hijack the Angiotensin Enzyme (ACE II), which, theoretically, enables the virus to access the blood pathways and subsequently, effect the respiratory system. Hydroxychloroquine in large amounts, ALONE, is not advised, however.

The virus that causes C 19 uses a backdoor to enter the cell. As it enters, it is exposed to an acidic, vinegar-like environment, which is actually needed for the virus to get all the way inside. Hydroxychloroquine metaphorically keeps the cap on the vinegar, Greene says, preventing acidification. Thus, there is a scientific rationale for how this drug might exert an antiviral effect, he says.

LA Doctor: C 19 Patients Go From 'Very Ill' to 'Symptom-Free' in 8 to 12 Hours Using Hydroxychloroquine and Zinc

A doctor in Los Angeles is reporting remarkable success in treating C 19 (Flu) patients with a combination of zinc and the Trump-touted anti-malarial drug hydroxychloroquine.

Dr. Anthony Cardillo, an ER specialist, and the CEO of Mend Urgent Care has been prescribing the combination of drugs to patients experiencing severe symptoms of the disease after contracting the novel CV.

"Every patient I've prescribed it has been very, very ill and within 8 to 12 hours, they were basically symptom-free," Cardillo said in an interview Sunday with KABC-TV. "So, clinically I am seeing a resolution."

He added that combining the drug with zinc has been the key to the success. The hydroxychloroquine, he said, "opens the zinc channel" allowing the zinc to enter the cell, which then "blocks the replication of cellular machinery."

Cardillo was careful to note that the drug should only be prescribed for patients who are extremely sick and in urgent need so as to not blow through the limited supply of the drug, which is used to treat other illnesses, as well.

"We have to be cautious and mindful that we don't prescribe it for patients who have C 19ID who are well," he said. "It should be reserved for people who are really sick, in the hospital or at home extremely sick, who need that medication. Otherwise we're going to blow through our supply for patients that take it regularly for other disease processes."

The U.S. Food and Drug Administration fast-tracked hydroxychloroquine and chloroquine for the treatment of C 19 late last month after three separate studies showed the pair of anti-malaria drugs to be a potentially promising remedy against the infectious disease.

President Trump has been optimistic about hydroxychloroquine's efficacy against the virus despite warnings from some health officials, including Dr. Anthony Fauci, who sits on the White House CV task force, who insists that evidence of its effectiveness is anecdotal, at best.

Trump called the drug a possible "game-changer" at a White House press briefing on March 19, arguing that prescribing the drug is worth a try since it is considered generally safe to use. However, the FDA advises against taking any form of the drug unless it has been prescribed by a doctor.

Hydroxychloroquine, in Concert with Azithromycin and Zinc, Defeat The Virus

Hydroxychloroquine, in concert with azithromycin and zinc, defeat the virus at the RNA level by passing zinc through the cellular membrane. The tried, true and inexpensive drugs thwart the ability of pharmaceutical labs to profit from the current outbreak.

Hydroxychloroquine and Azithromycin as a Treatment of C 19: Results of An Open-Label Non-Randomized Clinical Trial

Chloroquine and hydroxychloroquine have been found to be efficient on SARS-C 19-2 and reported to be efficient in Chinese C 19 patients. We evaluate the role of hydroxychloroquine on respiratory viral loads.

Patients and Methods

French Confirmed C 19 patients were included in a single arm protocol from early March to March 16th, to receive 600mg of hydroxychloroquine daily

and their viral load in nasopharyngeal swabs was tested daily in a hospital setting. Depending on their clinical presentation, azithromycin was added to the treatment. Untreated patients from another center and cases refusing the protocol were included as negative controls. Presence and absence of virus at Day6-post inclusion was considered the end point.

Results

Six patients were asymptomatic, 22 had upper respiratory tract infection symptoms and eight had lower respiratory tract infection symptoms.

Twenty cases were treated in this study and showed a significant reduction of the viral carriage at D6-post inclusion compared to controls, and much lower average carrying duration than reported of untreated patients in the literature. Azithromycin added to hydroxychloroquine was significantly more efficient for virus elimination.

Conclusion

Despite its small sample size our survey shows that hydroxychloroquine treatment is significantly associated with viral load reduction/disappearance in C 19 patients and its effect is reinforced by azithromycin.

--https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7102549/

Dr. Seheult Illustrates a Process of How Famotidine May Treat SARS Induced C 19

Let us talk about Pepcid, or Famotidine, as it is known, clinically. Famotidine is a medication that would fit nicely into one of the proteases enzymes on the viral. In an epidemiological study, we can see that Famotidine contains these small molecular compounds which might have the potential to operate as 3cl Pro inhibitors and could probably be used for treating SARS.

Potential Broad-Spectrum Inhibitors of the CV 3clpro: A Virtual Screening and Structure-Based Drug Design Study

Human CVes represent a significant disease burden; however, there is currently no antiviral strategy to combat infection. The outbreak of severe acute respiratory syndrome (SARS) in 2003 and Middle East respiratory syndrome (MERS) less than 10 years later demonstrates the potential of CVes to cross species boundaries and further highlights the importance of identifying novel lead compounds with broad spectrum activity.

The CV 3CLpro provides a highly validated drug target and as there is a high degree of sequence homology and conservation in main chain architecture the design of broad-spectrum inhibitors is viable. The ZINC drugs-now library was screened in a consensus high-throughput pharmacophore modeling and molecular docking approach by Vina, Glide, GOLD and MM-GBSA. Molecular dynamics further confirmed results obtained from structure-based techniques. A highly defined hit-list of 19 compounds was identified by the structure-based drug design methodologies.

As these compounds were extensively validated by a consensus approach and by molecular dynamics, the likelihood that at least one of these compounds is bioactive is excellent. Additionally, the compounds segregate into 15 significantly dissimilar ($p < 0.05$) clusters based on shape and features, which represent valuable scaffolds that can be used as a basis for future anti-coronaviral inhibitor disC 19ery experiments. Importantly though, the enriched subset of 19 compounds identified from the larger library has to be validated experimentally.

The computer comes up with Potential 3CLpro Inhibitors from the ZINC Drug Database. These names fit into the molecular structure of these enzymes and proteins.

However, be cautioned, in case you're wondering, the dose of Pepcid that's being used in the study is about nine times the dose that would normally be given for heartburn, and it's being given intravenously, so I do not recommend going out and buying out all of the Famotidine or Pepcid at your local drugstore.

Analysis of Therapeutic Targets For SARS-C 19-2 And DisC 19ery of Potential Drugs by Computational Methods

Abstract

SARS-C 19-2 has caused tens of thousands of infections and more than one thousand deaths. There are currently no registered therapies for treating CV infections. Because of time consuming process of new drug development, drug repositioning may be the only solution to the epidemic of sudden infectious diseases. We systematically analyzed all the proteins encoded by SARS-C 19-2 genes, compared them with proteins from other CVes, predicted their structures, and built 19 structures that could be done by homology modeling.

By performing target-based virtual ligand screening, a total of 21 targets (including two human targets) were screened against compound libraries including ZINC drug database and our own database of natural products. Structure and screening results of important targets such as 3-chymotrypsin-like protease (3CLpro), Spike, RNA-dependent RNA polymerase (RdRp), and papain like protease (PLpro) were discussed in detail. In addition, a database of 78 commonly used anti-viral drugs including those currently on the market and undergoing clinical trials for SARS-C 19-2 was constructed.

Possible targets of these compounds and potential drugs acting on a certain target were predicted. This study will provide new lead compounds and targets for further in vitro and in vivo studies of SARS-C 19-2, new insights for

those drugs currently ongoing clinical studies, and also possible new strategies for drug repositioning to treat SARS-C 19-2 infections.

Results

Analysis, structure prediction and homology modeling of SARS-C 19-2 encoded proteins

We obtained the SARS-C 19-2 genome from Gene Bank. The genome sequence of SARS-C 19-2/WHU02 was aligned with whole database using BLASTn to search for homology viral genomes. After phylogenetic analysis and sequence alignment of 22 CVes from various species. We found three CVes from bat (96%, 88% and 88% for Bat-C 19 RaTG13, bat-SL-C 19ZXC12 and bat-SL-C 19ZC45, respectively) have the highest genome sequence identity to SARS-C 19-2 (Fig. 1A). Moreover, as shown in Fig. 1B, Bat-C 19 RaTG13 exhibited the closest linkage with SARS-C 19-2.

Among all CVes from human, SARS-C 19 (80%) exhibited the highest genome sequence identity to SARS-C 19-2. And MERS/isolate NL13845 also has 50% identity with SARS-C 19-2. SARS-C 19 is the most clearly studied one among all these viruses according to previous literatures. Structure and function of its most genome encoded proteins have been elucidated in recent years. In this study, because of high genome identity between SARS-C 19-2 and SARS-C 19, the structure and function prediction of SARS-C 19-2 genome encoded protein were mainly based on those researches on homology protein in SARS-C 19. SARS-C 19-2 genome has 10 open reading frames (Fig. 2A). ORF1ab encodes replicase polyprotein 1 ab. After cleaved by two proteases, replicase proteins showed multifunction involved in transcription and replication of viral RNAs. ORF2-10 encodes viral structural proteins such as S, M, N, and E proteins, and other auxiliary proteins.

The S, M, E proteins are involved in the formation of the viral coat, and the N protein is involved in the packaging of the RNA genome (Fig. 2C). By aligning with the amino acid sequence of SARS PP1ab and analyzing the characteristics of restriction cleavage sites recognized by 3CLpro and PLpro,

we speculated 14 specific proteolytic sites of 3CLpro and PLpro in SARS-C 19-2 PP1ab (Fig. 2B). PLpro cleaves three sites at 181–182, 818–819, and 2763–2764 at the N-terminus and 3CLpro cuts at the other 11 sites at the C-terminus and forming 15 non-structural proteins. Among them, Nsp3 contains multiple domains, including a segment of SARS unique domain and a deubiquitination and proteolytic enzyme PLpro. Nsp5 is 3CLpro, Nsp12 is an RdRp, and Nsp13 is helicase. As a new CV, structure biology study about these proteins still at early stage. Until now, only one crystal structure of 3CLpro has been deposited in PDB (pdb code: 6LU7).

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As these compounds were extensively validated by a consensus approach and by molecular dynamics, the likelihood that at least one of these compounds

is bioactive is excellent. Additionally, the compounds segregate into 15 significantly dissimilar ($p < 0.05$) clusters based on shape and features, which represent valuable scaffolds that can be used as a basis for future anti-coronaviral inhibitor disC 19ery experiments. Importantly though, the enriched subset of 19 compounds identified from the larger library must be validated experimentally.

--https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4690886/

Potential 3CLpro Inhibitors from ZINC Drug Database

The above results suggest that the following small-molecule compounds might be the potential 3CLpro inhibitors and could probably be used for treating SARS-C 19-2:

No.	Drug name	Structure	Pharmacological functions
1	Lymecycline		Anti-bacterial effect
2	Chlorhexidine		Anti-bacterial effect
3	Alfuzosin		Anti-hypertensive agent, benign prostatic hyperplasia
4	Cilastatin		Renal peptidase inhibition
5	Famotidine		Anti-ulcerative activity

No.	Drug name	Structure	Pharmacological functions
6	Almitrine		Treatment of cognitive and chronic sensory nerve impairment
7	Progabide		Anti-epileptic effect
8	Nepafenac		Treatment of pain and inflammation associated with cataract surgery
9	Carvedilol		Vasodilator effect
10	Amprenavir		HIV-1 protease inhibition
11	Tigecycline		Anti-bacterial effect
12	Demeclocycline		Anti-bacterial effect
13	Montelukast		Anti-allergic, anti-asthmatic effects
14	Carminic acid		Food additive

No.	Drug name	Structure	Pharmacological functions
15	Mimosine		Depilatory effect
16	Flavin mononucleotide		Electron transfer in bio-oxidation
17	Lutein		Vision protection, anti-oxidation
18	Cefpiramide		Anti-bacterial effect
19	Phenethicillin		Anti-bacterial effect
20	Candoxatril		Anti-hypertensive effect
21	Nicardipine		Anti-hypertensive effect
22	Estradiol valerate		Treatment of estrogen deficiency
23	Pioglitazone		Anti-diabetic effect

No.	Drug name	Structure	Pharmacological functions
24	Conivaptan		Treatment of hyponatremia
25	Telmisartan		Anti-hypertensive effect
26	Doxycycline		Anti-bacterial effect
27	Oxytetracycline		Anti-bacterial effect

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https://www.sciencedirect.com/science/article/pii/S2211383520302999

Rather than CV Virus Attacking the Lungs Directly, it May be Attacking the Endothelium of the Body

It appears things are starting to crystallize in terms of how C 19 effects the human body, and we may have been looking at this from the wrong perspective, from the start. It seems that this is not a virus which infects the lungs directly. Rather, this is a virus which does minutely infect the lungs as a way of entry, but it seems to do its most damage in the *Endothelium of the body. This would explain why we are seeing such amounts of **Hypoxemia** without the concomitant or accompanying drop in compliance of the lung. Tt's because it's not the lungs that are causing the Hypoxia, necessarily. Not in every case but in many of the cases, it's possible that this is being mitigated by

Angiotensin 2 (ACE II), by runaway Thrombosis, by Hyper Coagulation, and by Endothelial Inflammation

This would also explain why patients might be getting signs in their feet these could represent *****Embolic Phenomenon** which are going to the ******Distal Extremities,** and the Angiotensin Converting Enzyme (ACE II) is the very target of the CV. The CV literally highjacks the ACE II enzyme to gain access to the blood transport system to, in turn, access the **Endothelium** of the body. The Angiotensin Enzyme is an extremely important enzyme in the balance of that oxidative stress, and when ACE II is highjacked, that balance is pushed in favor of *******Oxidative Stress**. And so, to really understand how to protect yourself from C 19, or how to treat a patient with C 19, is a complete understanding of Oxidative Stress is imperative. Additionally, what are the strategies that the body uses to mitigate Oxidative Stress?

1. ***The Endothelium**

   The Endothelium is a single layer of squamous endothelial cells that line the interior surface of blood vessels, and lymphatic vessels. The Endothelium forms an interface between circulating blood or lymph in the lumen and the rest of the vessel wall. Endothelial cells form the barrier between vessels and tissue and control the flow of substances and fluid into and out of a tissue. --Wikipedia
2. ****Hypoxemia facts:**

   Hypoxia is a condition or state in which the supply of oxygen is insufficient for normal life functions; Hypoxemia is a condition or state where there is a low arterial oxygen supply -- in some publications these terms are used interchangeably.
3. *****Embolic Phenomena:**

   Purplish discoloration of skin resulting from embolus to. small toe. In this case, the embolus originated from an infected aortic valve.
4. ******Distal Extremities:**

   Distal Extremities are situated away from the point of attachment or origin or a central point, located away from the center of the body at the distal end of a bone.
5. *******Oxidative Stress**

   Oxidative Stress is an imbalance between free radicals and antioxidants in your body. Free radicals are oxygen-containing

molecules with an uneven number of electrons. The uneven number allows them to easily react with other molecules.

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https://www.youtube.com/watch?v=DtPwfihjyrY

Oxidative Stress and Antioxidant Defense

Abstract

Reactive oxygen species (ROS) are produced by living organisms as a result of normal cellular metabolism and environmental factors, such as air pollutants or cigarette smoke. ROS are highly reactive molecules and can damage cell structures such as carbohydrates, nucleic acids, lipids, and proteins and alter their functions. The shift in the balance between oxidants and antioxidants in favor of oxidants is termed “oxidative stress.”

Regulation of reducing and oxidizing (redox) state is critical for cell viability, activation, proliferation, and organ function. Aerobic organisms have integrated antioxidant systems, which include enzymatic and nonenzymatic antioxidants that are usually effective in blocking harmful effects of ROS. However, in pathological conditions, the antioxidant systems can be overwhelmed. Oxidative stress contributes to many pathological conditions and diseases, including cancer, neurological disorders, atherosclerosis, hypertension, ischemia/perfusion, diabetes, acute respiratory distress syndrome, idiopathic pulmonary fibrosis, chronic obstructive pulmonary disease, and asthma. In this review, we summarize the cellular oxidant and antioxidant systems and discuss the cellular effects and mechanisms of the oxidative stress.

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https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3488923/

The Antioxidant Role of Glutathione and N-Acetyl-Cysteine Supplements and Exercise-Induced Oxidative Stress

Abstract

An increase in exercise intensity is one of the many ways in which oxidative stress and free radical production has been shown to increase inside our cells. Effective regulation of the cellular balance between oxidation and antioxidation is important when considering cellular function and DNA integrity as well as the signal transduction of gene expression.

Many pathological states, such as cancer, Parkinson's disease, and Alzheimer's disease have been shown to be related to the redox state of cells. In an attempt to minimize the onset of oxidative stress, supplementation with various known antioxidants has been suggested. Glutathione and N-acetylcysteine (NAC) are antioxidants which are quite popular for their ability to minimize oxidative stress and the downstream negative effects thought to be associated with oxidative stress. Glutathione is largely known to minimize the lipid peroxidation of cellular membranes and other such targets that is known to occur with oxidative stress. N-acetylcysteine is a by-product of glutathione and is popular due to its cysteine residues and the role it has on glutathione maintenance and metabolism. The process of oxidative stress is a complicated, inter-twined series of events which quite possibly is related to many other cellular processes.

Exercise enthusiasts and researchers have become interested in recent years to identify any means to help minimize the detrimental effects of oxidative stress that are commonly associated with intense and unaccustomed exercise. It is possible that a decrease in the amount of oxidative stress a cell is exposed to could increase health and performance.

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https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2129149/

Glutathione Deficiency May Be Related to C 19 Severity

Glutathione is largely known to minimize the lipid peroxidation of cellular membranes and other such targets that is known to occur with oxidative stress. N-acetylcysteine is a by-product of glutathione and is popular due to its cysteine residues and the role it has on glutathione maintenance and metabolism.

Top 9 Benefits of NAC (N-Acetyl Cysteine)

Cysteine is a semi-essential amino acid. It's considered semi-essential because your body can produce it from other amino acids, namely methionine and serine. It becomes essential only when the dietary intake of methionine and serine is low. Cysteine is found in most high-protein foods, such as chicken, turkey, yogurt, cheese, eggs, sunflower seeds, and legumes.

N-acetyl cysteine (NAC) is a supplement form of cysteine.

Consuming adequate cysteine and NAC is important for a variety of health reasons — including replenishing the most powerful antioxidant in your body, glutathione. These amino acids also help with chronic respiratory conditions, fertility and brain health.

N-Acetyl Cysteine (NAC) is essential for making the powerful antioxidant, Glutathione. NAC is valued primarily for its role in antioxidant production. Along with two other amino acids — glutamine and glycine — NAC is needed to make and replenish glutathione. Glutathione is one of the body's most important antioxidants, which helps neutralize free radicals that can damage cells and tissues in your body. It's essential for immune health and fighting cellular damage. Some researchers believe it may even contribute to longevity (1Trusted Source)

Its antioxidant properties are also important for combatting numerous other ailments caused by oxidative stress, such as heart disease, infertility, and some psychiatric conditions (2Trusted Source).

Summary

NAC helps replenish glutathione, arguably your body's most powerful antioxidant. Therefore, it can improve a variety of health conditions.

-- https://www.healthline.com/nutrition/nac-benefits#section1

Can UV Light Be Used to Kill Airborne Flu Virus?

As a particularly nasty flu season rages across the United States, scientists have found a powerful new disinfectant that makes "light" work of the virus.

Researchers say a certain spectrum of ultraviolet light -- called far-UVC -- easily kills airborne flu viruses while posing no risk to people.

It could offer a new, inexpensive way to eliminate airborne flu viruses in indoor public spaces such as hospitals, doctors' offices, schools, airports, and aircraft, said the team from Columbia University Medical Center in New York City.

The disinfecting success of initial experiments still need to be confirmed, said lead research David Brenner.

But he believes "the use of overhead, low-level far-UVC light in public locations would be a safe and efficient method for limiting the transmission and spread of airborne-mediated microbial diseases, such as influenza and tuberculosis."

As the researchers explained, broad-spectrum UVC light kills viruses and bacteria, and it is currently used to decontaminate surgical equipment. But this type of light can cause skin cancer and cataracts, so it is not used in public spaces.

However, Brenner and his colleagues wondered if a much narrower spectrum of ultraviolet light, far-UVC, might be a safer option.

In prior studies, they found that far-UVC light killed methicillin-resistant S. aureus (MRSA) bacteria -- a common and dangerous "superbug" -- without harming human or mouse skin.

In this new study, they found that far-UVC light also killed airborne H1N1 virus, a common strain of flu virus.

"Far-UVC light has a very limited range and cannot penetrate through the outer dead-cell layer of human skin or the tear layer in the eye, so it's not a human health hazard," said Brenner, who directs Columbia's Center for Radiological Research.

However, "because viruses and bacteria are much smaller than human cells, far-UVC light can reach their DNA and kill them," he said in a university news release.

Lamps with this type of UV light currently cost less than $1,000, Brenner said, but that price would likely fall if the lamps were mass-produced.

-- https://www.webmd.com/cold-and-flu/news/20180212/can-uv-light-be-used-to-kill-airborne-flu-virus-#1

Vitamin C

Vitamin C... the strongest cure for just about any disease, infection, bacterial, or viral imbalance.

1. Vaccines are poison.
2. Your body knows how to heal itself with vitamins, minerals, and sunlight.

3. Physician heal thyself.

Heparin and Aspirin

Heparin, also known as unfractionated heparin (UFH), is a medication and naturally occurring glycosaminoglycan. As a medication it is used as an anticoagulant (blood thinner). Specifically, it is also used in the treatment of heart attacks and unstable angina. It is given by injection into a vein or under the skin. Other uses include inside test tubes and kidney dialysis machines. – Wikipedia

Additionally. Aspirin interferes with your blood's clotting action. When you bleed, your blood's clotting cells, called platelets, build up at the site of your wound. The platelets help form a plug that seals the opening in your blood vessel to stop bleeding.

In that doctors are seeing a new link between hypoxia and blood clot risk, both Heparin and Aspirin seem likely candidates at easing Thrombosis symptoms in alleged C 19 patients. Researchers have found how hypoxia (a low concentration of oxygen) decreases Protein S, a natural anticoagulant, resulting in an increased risk for the development of potentially life-threatening blood clots (thrombosis). Although hypoxia has been associated with an increased risk for thrombosis, this research showed for the first time a molecular cause.

Herd Immunity and End the Lockdown

An antibody test in New York found that 21% of the population has already been infected with the virus. Is it time to lift the lockdowns?

Like the rest of the country, New York has imposed an economy-shattering lockdown of its population to contain C 19. But a recent study has poured cold water on the need for perpetual lockdowns. | Image: Spencer Platt/Getty Images/AFP

The CV has infected 21% of New York city's population, according to antibody tests.

The data imply the disease is much less fatal than previously believed, and lockdowns are not the best way to stop it.

Should more countries follow Sweden's controversial herd immunity strategy?

Officially, the Wuhan CV pandemic has infected over 2.7 million people around the globe. But in reality, the total number of infections could be millions more. According to antibody tests conducted in New York, up to 21% of the city's entire population has already been exposed to the virus, and most of these people were not recorded as infected.

These data build on similar findings in Italy and Germany that show vast numbers of undetected infections.

C 19 may not be as fatal as we think. And mass lockdowns may not be the best way to deal with the disease. A herd immunity strategy, as practiced in Sweden, may be more effective at stopping the pandemic.

What Are Antibody Tests, And Why Do They Matter?

When the human body is exposed to a virus, the immune system produces an antibody protein designed to counteract the pathogen. Antibody tests look for the presence of these antibodies to determine if a person has ever been infected.

A massive antibody study in New York estimates that 21% of the city's population has been infected with the CV. With a population of 8.4 million people, this implies that up to 1.2 million New Yorkers have contracted C 19 compared to an official count of 146,000–a 10x difference.

These data suggest that the CV is not nearly as fatal as its official case fatality rate would indicate. And lockdowns are not effective at stopping the virus. The virus will spread until the population gets herd immunity.

CV May Be Far Less Deadly Than We Think

The antibody tests in New York mirror similar findings in other hard-hit areas in Europe where antibody tests found large swathes of the population were already immune to the CV.

One of the first large-scale antibody tests was conducted in Heinsberg, Germany, where 14% of the population had antibodies to the virus. By comparing the estimated number of uncounted infections with recorded deaths, the study suggested that CV' death rate is as low as 0.37% compared to a 3.4% case fatality rate estimated by the WHO and 0.1% for seasonal influenza.

This information does not minimize the dangers of CV. The disease spreads far more rapidly than the seasonal flu. There is no vaccine, and there are disturbing reports of some people getting re-infected with C 19 after previously testing negative.

Is Herd Immunity the Solution to The CV Crisis?

That 21% of New York's population and counting (the state added 6,313 additional cases on Thursday) may have been infected raises questions about the effectiveness of America's massive lockdowns. The restrictions don't seem to be working very well, and the virus is still spreading rapidly. But if the real death rate is just 0.37%, this may not be such a bad thing.

Sweden, a wealthy country in Northern Europe, believes herd immunity is the key to fighting the CV pandemic.

The Swedish government encourages young, healthy people to go out and potentially get infected to create widespread immunity to the disease that will protect more vulnerable people from catching it.

So far, the country records 1,659 cases per 1 million people and 200 deaths per million people–well within the normal range for Europe. For comparison, Germany reports 1,828 cases per 1 million, while neighboring Norway reports 1,365 cases per 1 million people.

According to Dr. Anders Tegnell, the chief epidemiologist at Sweden's public health agency, data indicate that up to 20% of Stockholm's population is already immune to the virus, and the community could have herd immunity within weeks. This suggests Sweden has reached a similar spot as New York on the epidemiological curve without the economy-shattering lockdowns.

Is It Time to End the Lockdowns?

This comes at a time when nations in North America and Europe mull reopening their economies.

Denmark, Germany, Switzerland, and Austria are taking steps to end the lockdowns with schools and shops reopening. But the American public remains divided on the issue with Trump appearing to flip flop between supporting the lockdowns and reviving the economy. Several American states have plans to ease restrictions in May.

--https://www.ccn.com/CV-less-deadly-than-we-thought-time-to-end-lockdown/

Effective Medicine

1. Naturopathy
2. Natural Hygiene
3. Homeopathy
4. Herbalism
5. Nutritional Medicine
6. Supplements

Theoretical Treatments and Cures from the Standpoint of Viewing C 19 as a Bioweapon

Is C 19 more insidious than other CVes? The "genomic packing" mechanism of C 19 may be more like Ebola and HIV, researchers in the US and China say:

Scientists around the world are racing to understand C 19, the novel CV that has infected more than 210,000 people worldwide and killed over 8000 people as of Thursday. While there are many known viruses in the same class of CV as C 19, some of its peculiarities — including its infectivity — are perplexing researchers. Now, a recent research paper viewable on the Chinese research site Chinaxiv.org and previously reported on by the South China Morning Post notes that the new CV has an "HIV-like mutation" that gives it novel properties.

"Because of this mutation, the packing mechanism of the 2019-nC 19 may be changed to being more similar to those of MHV, HIV, Ebola virus (EBoV) and some avian influenza viruses," the English abstract of the paper states.

Alliin as an Angiotensin Enzyme Blocker

1.) Commercial designed and patented gene sequence in this super virus
2.) Masks do not block it. You need an Outbreak 4 level 2 containment suit to block it.
3.) The 19 C 19ID Corina Virus stays up to 28 days on surfaces, is airborne and fluid transported.
4.) Weaponized super virus aimed at America via the conduit of China outbreak

5.) They have not stopped shipping to America of infected Wuhan victims: Proof: Infected Couple shipped by from Wuhan to Hollister, Ca

6.) Medical Martial Law expected to roll out in America s as a reboot of China crisis

Angiotensin II is a very potent chemical produced by the body that primarily circulates in the blood. It causes the muscles surrounding blood vessels to contract, thereby narrowing the vessels. The narrowing of the vessels increases the pressure within the vessels causing increases in blood pressure (hypertension). Angiotensin II is formed from angiotensin I in the blood by the enzyme angiotensin converting enzyme (ACE). (Angiotensin I in the blood is itself formed from angiotensinogen, a protein produced by the liver and released into the blood.) Angiotensin converting enzyme inhibitors (ACE inhibitors) are medications that slow (inhibit) the activity of the enzyme ACE, which decreases the production of angiotensin II. As a result, blood vessels enlarge or dilate, and blood pressure is reduced.

The CV highjacks the Angiotensin enzyme in the endocrine system which regulates blood pressure. Alliin, the active ingredient in garlic, is a natural and safe Angiotensin enzyme blocker which results in preventing the Wuhan C 19 CV from attaching to the Angiotensin II (ACE II) chemical for transport. If the 19 C 19ID CV can highjack the enzyme receptors that allow it to freely transport with the ACE II chemical, then it can wreak havoc to the Kidneys, Respiratory System, and the Heart, which is exactly what we see with this particular strain of CV.

A genetic analysis of the spike-protein genes – the exact region that was bio-engineered by the UNC lab in 2015, where Zhengli Shi and Xing-Yi Ge previously isolated a batty CV that targets the ACE2 receptor just like this 2019-C 19 strain of the CV does – indicates an artificial and unnatural origins of the Wuhan Strain's spike-protein genes when they are compared to the genomes of wild relatives.

Instead of appearing similar and homologous to its wild relatives, an important section of the Wuhan Strain's spike-protein region shares the most

genetic similarity with a bio-engineered commercially available gene sequence that is designed to help with immunotherapy research. It is mathematically possible for this to happen in nature – but only in a ten-thousand bats chained to ten-thousand Petri dishes and given until infinity sense.

Use of angiotensin receptor blockers such as Telmisartan, Losartsan in C 19 Wuhan CV infections – Novel mode of treatment

Against the backdrop of the rapid spread of novel CV infection from Wuhan, China, to large areas globally and that besides supportive management, no novel modalities of treatment have been offered, we suggest the use of angiotensin II receptor blockers as a treatment for this infection.

Yushun Wan, Jian Shang et al have analyzed the potential receptor usage by 2019- C 19 based on the knowledge on sequencing of SARS- C 19. They have found that the sequence of 2019 C 19 receptor binding motif that directly contacts ACE2 (receptor Angiotensin converting enzyme 2) is similar to that of SARS–C 19 & suggest that 2019-C 19 (Wuhan) uses ACE 2 as its receptor. Their structural analysis predicted that the Wuhan CV uses ACE 2 as its host receptor. They have further stated that a single mutation significantly enhances the ability of C 19 (Wuhan) to bind with human ACE 2.

Based on this, we hypothesize the use of angiotensin II receptor blockers (ARB) available for clinical use can be potential drugs to be given for control of viral spread of novel CV (Wuhan) infection. An unpublished observation by one of us (MP) is that people using Losartan or Telmisartan tablets as antihypertensives get lesser attacks of cold & flu like illnesses. Both these drugs also do not produce cough as the side effect so commonly seen with ACE inhibitors.

Losartan and Telmisartan strongly bind to the AT1 receptors more than Valsartan. Therefore, use of the former could be suitable in treatment of novel CV (Wuhan, China) infections. Mode of administration in addition to being given orally, could be in the form of a nasal spray. Published literature is scant on this information. Clinicians and scientists may consider use of Losartan or

Telmisartan in therapeutic doses for preventing the C 19 virus entering the host cell and spread of infection. Rapid clinical trials are the need of the hour.

Alliin

From Wikipedia, the free encyclopedia:

...that is a natural constituent of fresh garlic. It is a derivative of the amino acid cysteine. When fresh garlic is chopped or crushed, the enzyme alliinase converts alliin into allicin, which is responsible for the aroma of fresh garlic.

Garlic has been used since antiquity as a therapeutic remedy for certain conditions now associated with oxygen toxicity, and, when this was investigated, garlic did indeed show strong antioxidant and hydroxyl radical-scavenging properties, it is presumed owing to the alliin contained within. Alliin has also been found to affect immune responses in blood.

Alliin was the first natural product found to have both carbon- and sulfur-centered stereochemistry.

Chemical synthesis

The first reported synthesis, by Stoll and Seebeck in 1951, begins the alkylation of L-cysteine with allyl bromide to form Deoxyalliin. Oxidation of this sulfide with hydrogen peroxide gives both diastereomers of L-alliin, differing in the orientation of the oxygen atom on the sulfur stereocenter.

Allicin Capsule Form

Allicin is a compound produced when garlic is crushed or chopped. Available in dietary supplement form, it has been found to reduce inflammation and offer antioxidant benefits. Fresh garlic contains an amino acid called alliin. When the clove is crushed or chopped, an enzyme, alliinase, is released. Allicin is an angiotensin receptor blocker.

ACE Inhibitors Drug Class Side Effects, List of Names, Uses, and Dosage

What are ACE inhibitors, and how do they work (mechanism of action)?

Angiotensin II is a very potent chemical produced by the body that primarily circulates in the blood. It causes the muscles surrounding blood vessels to contract, thereby narrowing the vessels. The narrowing of the vessels increases the pressure within the vessels causing increases in blood pressure (hypertension). Angiotensin II is formed from angiotensin I in the blood by the enzyme angiotensin converting enzyme (ACE). (Angiotensin I in the blood is itself formed from angiotensinogen, a protein produced by the liver and released into the blood.) Angiotensin converting enzyme inhibitors (ACE inhibitors) are medications that slow (inhibit) the activity of the enzyme ACE, which decreases the production of angiotensin II. As a result, blood vessels enlarge or dilate, and blood pressure is reduced. This lower blood pressure makes it easier for the heart to pump blood and can improve the function of a failing heart. In addition, the progression of kidney disease due to high blood pressure or diabetes is slowed.

Hydroxychloroquine, Chloroquine, and Azithromycin

Pfizer has announced positive data for the use of its azithromycin (Zithromax) drug, along with hydroxychloroquine, in a CV (C 19) clinical trial performed in France.

The trial was conducted to assess anti-malarial drug hydroxychloroquine in 20 patients, six of which were also administered with azithromycin.

Compared with 16 controls, the proportion of participants who achieved virologic cure following six days of treatments was observed to be higher in the 20 patients treated with hydroxychloroquine.

In addition, the rate of cure was highest in people who received hydroxychloroquine and azithromycin.

Pfizer previously assessed azithromycin as an anti-infective alone and also in combination with other therapies, including chloroquine.

https://www.clinicaltrialsarena.com/news/pfizer-data-azithromycin-C 19-trial/

Things That Suppress Our Immune System

1.) Masks (less oxygen)
2.) Gloves (cutting off contact with common microbials)
3.) No sun (less vitamin D, essential to protecting cells, hence "flu season" in winter months)
4.) Fear (thoughts create chemical reactions that deposit into our blood, which creates the ph balance of our cells)
5.) ***Vaccines** (directly responsible for most acute and chronic diseases due to a HOST of toxic, carcinogenic ingredients never tested for safety in the combination in which they're administered, and no wonder they never let you see the manufacturer's fine print packaging)
6.) Washing hands with synthetic soaps (killing off good bacteria and introducing known toxins that contribute to cancer).

ALL of these things are recommended by our authorities and those we're supposed to look up to and be impressed by. Consistency is key. And here they do not fail. Big tobacco, central banks, fiat currency, the death care system, media propaganda, corporatocracy and legal poisoning... it's a world of inversion, folks... until WE change it.

***A Harvard Vaccine study was decommissioned by the CDC for its unfavorable findings: "Adverse events from drugs and vaccines are common, but underreported... fewer than 1% of vaccine adverse events are reported. Unfortunately, there was never an opportunity to perform system performance assessments because the necessary CDC contacts were no longer available and the CDC consultants responsible for receiving data were no longer responsive to our multiple requests to proceed with testing and evaluation."**

--Michael Klompas, MD and Lazarus Ross, MD https://digital.ahrq.gov/ahrq-funded-projects/electronic-support-public-health-vaccine-adverse-event-reporting-system

Additional C 19 Possible Characteristics

- Carriers Are Highly Contagious Even with No Symptoms
- Cytokine Storms (A Cytokine storm is an overproduction of immune cells and their activating compounds (cytokines), which, in a flu infection, is often associated with a surge of activated immune cells into the lungs) resulting in "Drop Dead Syndrome"
- Observed in Numerous Cases – What Does A Cytokine Storm Feel Like? The Primary Symptoms of a Cytokine Storm Are High Fever, Swelling and Redness, Extreme Fatigue and Nausea. In Some Cases, The Immune Reaction May Be Fatal.
- Virus Particles Can Last Up To 24 Days on Surfaces
- People Will Get Infected by Delivery Amazon Etc...
- And While Handling Cash
- Airborne Infections Can Occur in Less Than 15 Seconds While Having A Conversation with An Asymptomatic Person
- Airborne Particles Can Infect the Eyes Like Pink Eye
- Virus Can Move Thru Most Masks (P95/ P99 Masks)
- And Can Move Up Sewer Pipes
- Get Plugs for Sinks Etc
- Avoid Crowds
- Lower Your Virus Exposure by Becoming Germaphobe
- Because of relapse, C 19 may be worse than SARS in mortality rate, up to 30% dying who are infected.
- As your viral load goes up, you get sicker and sicker. It does not go away.

Additional Curative Measures

- Drink Pomegranate Juice
- Gargle with Hydrogen Peroxide (Kills the virus)
- Spray everything with Lysol
- Wash hands frequently
- Wash things down with bleach or white vinegar
- Use hand sanitizer frequently
- Wear Corona N95 or N99 Virus mask
- Wear Goggles

Nutraceuticals to Support Immune System

A Nutraceutical or Bioceutical is a pharmaceutical alternative which claims physiological benefits. In the US, Nutraceuticals are largely unregulated, as they exist in the same category as dietary supplements and food additives by the

FDA, under the authority of the Federal Food, Drug, and Cosmetic Act". --
Wikipedia

1. Turmeric
2. Thyme
3. Rosemary
4. Chicory
5. Ginger Root
6. Artichoke
7. Burdock
8. Oregano
9. Eucalyptus
10. Forsythia
11. Asparagus
12. Lysine
13. Colloidal Silver
14. Vitamins B, C, D, K, Plus Magnesium
15. Ferulic acid: 500-1,000 mg
16. Lipoic acid: 1,200-1,800 mg (in place of ferulic acid)
17. Spirulina: 15 g (or 100 mg PCB, which is an extract)
18. N-Acetylcysteine: 1,200–1,800 mg
19. Selenium: 50-100 mcg
20. Glucosamine: 3,000 mg or more
21. Zinc: 30-50 mg
22. Yeast Beta-Glucan: 250-500 mg
23. Elderberry: 600–1,500 mg

Garlic (Crushed Becomes Alliin) as Cure for Most Diseases

"Garlic has been shown to help our white blood cells not only defend us against cancer, but also to increase our ability to destroy tumors...Garlic has been found to stimulate interferon production, enhance natural killer cells, stop

tumor growth, and even reduce the associated pain of cancer. Most of the research has been done on cancers of the digestive tract."--Dr Richard Shulze

I have seen garlic heal cancer, inside and out and I have seen it destroy all bacteria, virus, fungus, worms and parasites, everything inside, and outside too. Garlic is the most potent killer of bacteria, virus, and fungus, in fact any antigen/pathogen, stronger than any other herb. In other words, echinacea may stimulate the immune system more than garlic, at least there is more clinical proof of this, but it is not nearly as potent at directly destroying pathogens. Garlic does enhance the immunity but is the deadliest killer of everything that can hurt you. This is why I say echinacea and garlic are the best dynamic duo.

Pharmaceutical antibiotics are non-selective in their destruction of bacteria in your body; they just destroy it all. This creates many problems because our body has millions of so-called friendly bacteria that we need for proper metabolic functions. This is why many people, after a course of antibiotic therapy, have digestive problems, constipation, and yeast and fungal overgrowth infections. A worse problem is that antibiotics don't destroy 100% of a bacteria strain in your body. Usually only 99%. The remaining bacteria mutates, becomes more deadly and antibiotic resistant. This is how very lethal, antibiotic-resistant strains of bacteria are created.

Garlic is totally selective in its bacteria destruction, only killing bacteria that's harmful to our body. What is amazing is that, at the same time, garlic actually enhances our friendly bacteria and improves our intestinal flora and digestion. Garlic destroys many types of bacteria including Streptococcus, Staphylococcus, Typhoid, Diphtheria, cholera, bacterial dysentery, Tuberculosis, Tetanus, Rheumatic bacteria, and many others. But, that's not all, garlic is also an extremely potent anti-viral agent. Garlic has been tested against many viruses and is known to destroy on contact the viruses that cause Measles, Mumps, Mononucleosis (Epstein-Barr), Chicken pox, Herpes simplex #1 and #2, Herpes Zoster, Viral Hepatitis, scarlet fever, Rabies and others. But still, that is not all. Garlic's anti-fungal ability is second to none. In the laboratory, it has proven to be more potent than any known antifungal agent

including Nystatin. Garlic will regulate the overgrowth of Candida albicans and positively kill ringworm.

Garlic is a proven cancer remedy. About 1/3rd of all the medical research into garlic is cancer related. Garlic has been shown to help our white blood cells not only defend us against cancer, but also to increase our ability to destroy tumors. When the properties of garlic are present in the bloodstream, many aspects of our immunity are enhanced. Garlic has also been found to stimulate interferon production, enhance natural killer cells, stop tumor growth, and even reduce the associated pain of cancer. Most of the research has been done on cancers of the digestive tract. In one medical university study, garlic was shown to reduce stomach cancer 10 times more effectively than the non-garlic-eating group.

--http://www.whale.to/w/garlic.html

Chapter 9

Welcome to Vacci-NATION

The Arrogance of the Scientific Dictatorship

Let's be clear about this. Scientists are claiming that Vaccines are superior to nature's tried and true herd immunity process. Why do immune

systems need a "rehearsal for the real thing", which is the foundational hypothesis underlying Vaccination. Nature isn't sufficient?

This is the same Nature that constructs the human body from the microscopic DNA information level, which contains millions and millions of perfectly coordinated interconnecting processes and components, working in an infinitely complex orchestration so complex that medical science is still trying to figure out how it all works together at the immune system level. The sheer hubris intrinsic to the Vaccination approach to immunology is a staggeringly blatant confession of the modern Vaccine industries ignorance of the role of Antigens in immunology. In other words, there is no scientific evidence to support that manmade Vaccines are superior to the human body's natural Antigen based immuno-response.

Antigens are Superior to Manmade Vaccines

Antigens are substances (usually proteins) on the surface of cells, viruses, fungi, or bacteria. Nonliving substances such as toxins, chemicals, drugs, and foreign particles (such as a splinter) can also be Antigens. The immune system recognizes and destroys, or tries to destroy, substances that contain Antigens.

In immunology, an antigen (Ag) is a molecule or molecular structure, such as may be present at the outside of a pathogen, that can be bound to by an antigen-specific antibody or B-Cell Antigen Receptor. The presence of antigens in the body normally triggers an immune response. The term "antigen" originally described a structural molecule that binds specifically to an antibody only in the form of native antigen.[It was expanded later to refer to any molecule or a linear molecular fragment after processing the native antigen that can be recognized by T-Cell Receptor. B-Cell Antigen Receptors and T-Cell Receptors are both highly variable antigen receptors diversified by somatic Variable (V), Joining (J), and in some cases, Diversity (D) gene segments., known as V(D)J recombination.

V(D)J recombination

V(D)J recombination is the unique mechanism of genetic recombination that occurs only in developing lymphocytes during the early stages of T and B cell maturation. It involves somatic recombination, and results in the highly diverse repertoire of antibodies/immunoglobulins and T cell receptors (TCRs) found in B cells and T cells, respectively. The process is a defining feature of the adaptive immune system.

Autoimmunity

V(D)J recombination occurs in the primary lymphoid organs (bone marrow for B cells and thymus for T cells) and in a nearly random fashion rearranges variable (V), joining (J), and in some cases, diversity (D) gene segments. The process ultimately results in novel amino acid sequences in the antigen-binding regions of immunoglobulins and TCRs that allow for the recognition of antigens from nearly all pathogens including bacteria, viruses, parasites, and worms as well as "altered self-cells" as seen in cancer. The recognition can also be allergic in nature (e.g. to pollen or other allergens) or may match host tissues and lead to **Autoimmunity**.

Antigens are "targeted" by antibodies. Each antibody is specifically produced by the immune system to match an antigen after cells in the immune system come into contact with it; this allows a precise identification or matching of the antigen and the initiation of a tailored response. The antibody is said to "match" the antigen in the sense that it can bind to it due to an adaptation in a region of the antibody; because of this, many different antibodies are produced, each able to bind a different antigen while sharing the same basic structure. – Wikipedia

Vaccinations are Based Upon Erroneous Logic

Theoretically, Vaccines expose you to a very small, very safe number of viruses or bacteria that have been weakened or killed. Your immune system then learns to recognize and attack the infection if you are exposed to it later in life. As a result, you will not become ill, or you may have a milder infection.

The idea is that a vaccine works by training the immune system to recognize and combat pathogens, either viruses or bacteria. To do this, certain molecules from the pathogen must be introduced into the body to trigger an immune response. These molecules are called antigens, and they are present on all viruses and bacteria. By injecting these antigens into the body, the immune system can safely learn to recognize them as hostile invaders, produce antibodies, and remember them for the future. If the bacteria or virus reappears, the immune system will recognize the antigens immediately and attack aggressively well before the pathogen can spread and cause sickness.

But this outlook is riddled with pseudo-science:

1.) You cannot kill viruses because viruses are not alive, to begin with. They are merely bits of RNA or DNA submerged within protein material. In no way do they satisfy the definition of life, in any way. They are as alive as a piece of kitchen sponge. They do not evolve, grow, respirate, experience mitosis, or do anything else that satisfies the definition of a living entity.
2.) You cannot weaken a virus. Viruses are merely the misnamed Exosomotic Detoxification System in the human body. Viruses are simply excretions of a toxic cell. Viruses are pieces of RNA or DNA with a few other proteins that bud out from the cell. They are identical to Exosomes, in function, and may actually be considered The Exosomotic Detoxification System in the intercellular environment.
3.) The foundational assumption of vaccinations is that a virus is the enemy. This has never been proven. Based upon this assumption, a Vaccine is developed to target one aspect of the immune system, while neglecting all the other possible Natural Antigen Response (NAR) variables that may be the true cause of a particular disease.

Examples of such variables are:

- Environmental toxicity
- Air Pollution

- Stress
- Molds
- Fungi
- Chemical inundation
- Electromagnetic radiation pollution
- Poor air quality
- Poor water quality
- Poor food quality
- Nutritional deficiencies
- Poor combination or choice of foods
- Toxifying medical treatments, such as antibiotics, vaccines, and pharmaceuticals
- Environmental metal toxicity
- Unhealthy lifestyle, including sexual promiscuity, perversion, and poor hygiene
- Drug use

All of these possible causes can trigger a cascade of intracellular and intercellular events that can lead to disease. The fact that modern medicine assumes that some imaginary, unseen viral enemy must be the culprit, without first considering the immunological and Antigen response implications of such immune system antagonizers and insults, reveals that the agenda behind such medical quackery in not health at all. Rather, it is the continual construction of the narrative, "Health is achieved through Vaccination, only.", with multibillion-dollar prizes in Vaccine funding and grants to be made by virtue of this insidious narrative.

I smell a rat…a Vaccine rat.

A C 19 Vaccine Cannot Help You Because CVes Mutate Constantly

CVes are always mutating. Hence, Vaccines cannot help you.

Besides:

- Vaccines cause more virulent strains of CV
- Vaccines cause cancer
- Vaccines cause Autism
- Vaccines cause respiratory illness

Toxic Vaccine Ingredients: The Devil is in the Details

Toxins surround us in many forms, but those found in vaccines are of increasing concern among parents, and rightfully so. As the Children's Health Defense continues to advocate for transparency and sound science in our nation's vaccine program, it's important to note that mercury, still found in some flu shots and other vaccines, isn't the only substance standing in the way of a safer vaccination schedule. Other dangerous substances abound in the vaccines that our government agencies continue to insist are safe. No one challenges parents for researching the safest car seats, cribs, or infant carriers for their children. The same should hold true when parents want to be fully informed about what makes up the vaccines intended for their children.

Beyond the mercury-based preservative thimerosal, a known neurotoxin that has been linked to many serious health conditions including autism, vaccines are rife with other often questionable components, such as:

1) Mercury
2) Aluminum
3) Antibiotics
4) Egg protein
5) Formaldehyde
6) Monosodium glutamate (MSG)

7) Squalene
8) Gelatin
9) Polysorbate 80
10) Aborted human fetal tissue

…no studies have been done to determine potential synergistic effects of multiple vaccine ingredients given in combination.

An extensive list of all ingredients in all vaccines can be found here, but it's important to highlight (or lowlight, if you will) what some of the most potent components actually are, and what impact they may have on the health of our children.

Thimerosal

The American Academy of Pediatrics (AAP) claims thimerosal was removed from childhood vaccines as a precautionary measure in 2001, but the last batches of routine childhood vaccines with thimerosal did not actually expire until January 2003. We were led to believe thimerosal was eliminated from all vaccines, but it wasn't. It's in some flu shots—including some given to infants and pregnant women—the tetanus toxoid vaccine (Tt), and meningococcal vaccines. More than 80 studies compiled by the Children's Health Defense show that the health effects of human exposure to mercury include cognitive difficulties (such as autism), memory and vision loss, coordination issues, tremors, skin rashes and mood instability. Mercury is a known neurotoxin, yet it's still injected into people of all ages with alarming regularity.

Aluminum

The CDC explains that aluminum gels or salts are added as adjuvants to help the vaccine stimulate a better immune response, i.e. be more effective. Without aluminum, more doses of a vaccine might be required to provide adequate protection, according to the AAP. Aluminum is a toxic metal, and one to which we are already routinely exposed through food, air, and water, given

its natural occurrence in the earth's crust. While most in mainstream medicine insist it poses no problems, many independent researchers are suspicious of aluminum's supposed safety. The National Vaccine Information Center (NVIC), a nonprofit founded in 1982 to prevent vaccine injuries and deaths through public education, highlights on its website the shocking lack of scientific evidence that injected aluminum is safe. And parents need to be aware that the amount of aluminum babies and young children are exposed to via vaccines has risen substantially in recent years. According to medical research journalist Neil Z. Miller, "Vaccines containing aluminum were added to the childhood immunization schedule when some vaccines containing mercury were removed. Prior to the mercury phase-out (pre-2000), babies received 3,925 mcg of aluminum by 18 months of age. After pneumococcal and hepatitis, A vaccines were added to the schedule, babies began receiving 4,925 mcg of aluminum during the same age period—a 25% increase."

Antibiotics

The antibiotics added to vaccines are there to prevent the growth of germs during production and storage of the vaccine. There has been much debate lately over the risks of exposing children to antibiotics too early in life. One recent study in particular found that multiple antibiotic use in early childhood may lead to weight gain, increased bone growth, and altered gut bacteria.

Egg Protein

Flu vaccines are most commonly made using an egg-based manufacturing process, which is used to make both the inactivated vaccine (the flu shot) and the live attenuated vaccine (usually called the "nasal spray"), according to the CDC. The yellow fever vaccine is also made this way, putting anyone with an egg allergy at risk if they receive either of these vaccinations, regardless of how low the level of actual egg protein is.

Formaldehyde

Formaldehyde is added to vaccines to kill unwanted bacteria and viruses that might contaminate the vaccine during production. The CDC insists most formaldehyde is removed from the vaccine before it is packaged, which is just another way of saying that all of it is not removed. Formaldehyde is a human carcinogen according to the National Institute of Environmental Health Sciences.

Monosodium Glutamate (MSG)

More commonly known as a food additive, MSG is also used as a stabilizer to help vaccines remain unchanged when exposed to heat, light, acidity, or humidity, according to the CDC. MSG consumption is notorious for causing headaches in some people. It can also cause fatigue, disorientation, and heart palpitation, per the Mayo Clinic. MSG has been called an "excitotoxin," which is a term used to describe a class of chemicals (usually amino acids) that over-stimulate neuron receptors in the brain, causing them to die.

Squalene

The World Health Organization (WHO) describes squalene as "a component of some adjuvants that is added to vaccines to enhance the immune response." It's a naturally occurring substance derived primarily from shark liver oil, found in foods, cosmetics, over-the-counter medications, and supplements. When combined with other ingredients it becomes an adjuvant, which, like aluminum, is added to vaccines to elicit a stronger immune response from the body. The WHO notes that most people who have received squalene-containing vaccines are in older age groups, and that we don't really know how this component might impact younger people. A 2000 study found that a single injection of squalene adjuvant produced arthritis in rats, and, although more research is needed, many believe squalene-containing anthrax vaccine to be the main culprit in triggering Gulf War Syndrome among American troops who served in the Persian Gulf War in the early 1990s.

Gelatin

This commonly used vaccine ingredient is made by boiling skin or connective tissue, typically from a pig. Gelatin is used as a stabilizer to protect the viruses in vaccines from adverse conditions. It is a concerning additive because some people have gelatin allergies and receiving a vaccine with gelatin can provoke an allergic response, possibly even triggering anaphylaxis. Depending on its source, gelatin may also be a religious concern for Jews and Muslims.

Polysorbate 80

The HPV vaccine is administered mainly to teenagers to protect against the human papilloma virus (HPV), which has been strongly linked to cervical cancer, anal cancer, and even some mouth cancers. This vaccine and a few others contain a stabilizer known as polysorbate 80, an emulsifier used in some foods and cosmetics. While there have been reports of the HPV vaccine causing premature ovarian failure in girls, research is needed to determine if there is a link between this phenomenon and polysorbate 80 and/or other HPV vaccine ingredients such as aluminum. The safety of using this chemical in vaccines has been poorly studied, and according to the Material Safety Data Sheet (MSDS) for Polysorbate 80, it may cause adverse reproductive effects and cancer based on animal testing data. The MSDS also indicates that no safety testing has been done in humans.

Aborted Human Fetal Tissue

A number of vaccines—including varicella, rubella, hepatitis A, shingles, and rabies—are made using fetal embryo cells, and have been for decades. The reason given is that the viruses tend to grow better in these cells, and fetal cells can divide for a long time before dying. However, the use of actual human fetal cells poses the question of how the fetal DNA will interact with the virus and, eventually, the human into which it is injected. It remains unclear what kind of dangerous immune response this has been provoking, but according to the Sound Choice Pharmaceutical Institute, a biomedical research organization, there have been distinct spikes in autism rates in the years when vaccines grown in human fetal cells were introduced. In my opinion, the moral implications here are huge.

As troubling as each of one these chemicals may be in its own right, parents need to also keep in mind that no studies have been done to determine potential synergistic effects of multiple vaccine ingredients given in combination. Safety concerns are further compounded when considering that infants and young children commonly receive multiple vaccines during the same office visit. Amid relentless claims by drug companies and conflict-ridden health agencies that vaccines are "safe and effective" (despite the fact than nearly $4 billion has been paid out by taxpayers to victims of vaccine injury) parents are wise to do their own research before making decisions about vaccines for their kids—and to understand that where there's risk, there must be choice.

-- https://childrenshealthdefense.org/news/toxic-vaccine-ingredients-the-devils-in-the-details/

David Crowe Explains Why Antibody Tests are a Farce

David Crowe Challenges the DisC 19ery of The C 19 Virus: Flaws in CV Pandemic Theory

Executive Summary

The world is suffering from a massive delusion based on the belief that a test for RNA2 is a test for a deadly new virus, a virus that has emerged from wild bats or other animals in China, supported by the western assumption that Chinese people will eat anything that moves. If the virus exists, then it should be possible to purify viral particles. From these particles, RNA can be extracted and should match the RNA used in this test. Until this is done it is possible that the RNA comes from another source, which could be the cells of the patient, bacteria, fungi etc. There might be an association with elevated levels of this RNA and illness, but that is not proof that the RNA is from a virus. Without purification and characterization of virus particles, it cannot be accepted that an

RNA test is proof that a virus is present. Definitions of important diseases are surprisingly loose, perhaps embarrassingly so.

A couple of symptoms…maybe contact with a previous patient, and a test of unknown accuracy, is all you often need. While the definition of SARS, an earlier CV panic, was self-limiting, the definition of C 19 disease is open-ended, allowing the imaginary epidemic to grow. Putting aside the existence of the virus, if the C 19 test has a problem with false positives (as all biological tests do) then testing an uninfected population will produce only false-positive tests, and the definition of the disease will allow the epidemic to go on forever. This strange new disease, officially named C 19, has none of its own symptoms. Fever and cough, previously blamed on uncountable viruses and bacteria, as well as environmental contaminants, are most common, as well as abnormal lung images, despite those being found in healthy people.

Yet, despite the fact that only a minority of people tested will test positive (often less than 5%), it is assumed that this disease is easily recognized. If that was truly the case, the majority of people selected for testing by doctors should be positive. The C 19 test is based on PCR, a DNA manufacturing technique. When used as a test it does not produce a positive/negative result, but simply the number of cycles 1 Officially the virus is called SARS-C 19-2 and the disease it is believed to caused, C 19. We will just refer to C 19 for the current virus panic, and SARS for the 2003 panic. 2 Ribonucleic Acid (RNA) is chemically terribly similar to DNA, except that one of the four bases, Thymine, is replaced by Uracil. In function it is hugely different, being created from DNA for a temporary use such as creating a protein molecule or being a messenger.

It is also found in a single strand rather than a double helix. 2 required to detect sufficient material to beat the arbitrary cutoff between positive and negative. If positive means infected and negative means uninfected, then there are cases of people going from infected to uninfected and back to infected again in a couple of days. A lot of people say it is better to be safe than sorry. Better that some people are quarantined who are uninfected than risk a

pandemic. But once people test positive, they are likely to be treated, with treatments similar to SARS.

Doctors faced with what they believe is a deadly virus treat for the future, for anticipated symptoms, not for what they see today. This leads to the use of invasive oxygenation, high dose corticosteroids, antiviral drugs and more. In this case, some populations of those diagnosed (e.g. in China) are older and sicker than the general population and much less able to withstand aggressive treatment. After the SARS panic had subsided doctors reviewed the evidence, and it showed that these treatments were often ineffective, and all had serious side effects, such as persistent neurologic deficit, joint replacements, scarring, pain, and liver disease, as well as higher mortality.

Virus Existence

Scientists are detecting novel RNA in multiple patients with influenza or pneumonia-like conditions, and are assuming that the detection of RNA (which is believed to be wrapped in proteins to form an RNA virus, as CVes are believed to be) is equivalent to isolation of the virus. It is not, and one of the groups of scientists was honest enough to admit this: "we did not perform tests for detecting infectious virus in blood"

But, despite this admission, earlier in the paper they repeatedly referred to the 41 cases (out of 59 similar cases) that tested positive for this RNA as, "41 patients… confirmed to be infected with 2019-nC 19." Another paper quietly admitted that: "our study does not fulfill Koch's postulates" Koch's postulates, first stated by the great German bacteriologist Robert Koch in the late 1800s, are simple logic, and can be stated as:

4) Purify the pathogen (e.g. virus) from many cases with a particular illness.
5) Expose susceptible animals (obviously not humans) to the pathogen.
6) Verify that the same illness is produced.

Some add that you should also re-purify the pathogen, just to be sure that it really is creating the illness. Famous virologist Thomas Rivers stated in a

1936 speech, “It is obvious that Koch's postulates have not been satisfied in viral diseases”.

That was a long time ago, but the problem continues. None of the papers referenced in this article have even attempted to purify the virus. And the word ‘isolation’ has been so debased by virologists it means nothing (e.g. adding impure materials to a cell culture and seeing cell death is ‘isolation’). Reference [1] did publish electron micrographs, but it can clearly be seen in the lesser magnified photo, that the particles believed to be C 19 are not purified, as the quantity of material that is cellular is much greater. The paper notes that the photos are from “human airway epithelial cells”.

Also consider that the photo included in the article will certainly be the “best” photo, i.e. the one with the greatest number of particles. Lab technicians may be encouraged to spend hours to look around to find the most photogenic image, the one that most looks like pure virus. There is no way to tell that the RNA being used in the C 19 PCR test is found in those particles seen in the electron micrograph, because you cannot see what the contents are, they could be protein, RNA or DNA. There is thus no connection between the test, and the particles, and no proof that the particles are viral.

A similar situation was revealed in March 1997 concerning HIV, when two papers published in the same issue of the journal “Virology” revealed that the vast majority of what had previously been called “pure HIV” was impurities that were clearly not HIV, and the mixture also included micro-vesicles that look very similar to HIV under an electron microscope, but are of cellular origin.

Disease Definition and Testing

Infectious diseases always have a definition, but they are usually not publicized too widely because then they would be open to ridicule. They usually have a “suspect case” category based on symptoms and exposure, and a “confirmed” category that adds some kind of testing. Reference [13] describes a suspect case definition for C 19, derived from WHO definitions for SARS and MERS (Middle East Respiratory Syndrome).

This definition was in effect until January 18, 2020 and required all four of the following criteria:

"Fever, with or without recorded temperature". Note that there is no universal definition of fever, so this may just be the opinion of a physician or nurse. With SARS a fever was defined as 38C even though normal body temperature is considered to be 37C (98.6F).

"Radiographic evidence of pneumonia". This can occur without illness, as was seen in a 10-year-old boy with no clinical symptoms. He was diagnosed with pneumonia despite this.

- "Low or normal white-cell count or low lymphocyte count".

This is not really a criterion as every healthy person is included. This is also strange because people suffering from an infection normally have elevated white blood cell counts (although they may drop in people dying from an infection).

One of the following three:

4) "No reduction in symptoms after antimicrobial treatment for 3 days". This is a standard indication of a 'viral' pneumonia, i.e. one that does not resolve with antibiotics.
5) "Epidemiologic link to the Huanan Seafood Wholesale Market". This, and the next criterion, create the illusion of an infectious disease, as it prefers the diagnosis of connected cases.
6) "Contact with other patients with similar symptoms".

On January 18th, the last, three-part category was changed to:

- "Travel history to Wuhan"
- "Direct contact with patients from Wuhan who had fever or respiratory symptoms, within 14 days before illness onset"

The big problem is that, in contrast to the definition for SARS, a "confirmed case" of C 19 did not originally require the criteria for a suspect case to be met, but simply a positive RNA test. It did not require any symptoms or evidence of contact with previous cases, illustrating total faith in the PCR technology used in the test. The World Health Organization definition has the same flaw. It was the fact that the SARS definition required both a reasonable possibility of contact with a previous case, and symptoms, that allowed the epidemic to burn out.

Once everyone was quarantined, contact with an existing case was highly unlikely, testing stopped, and doctors could declare victory. The Chinese eventually woke up and, around February 16th required confirmed cases to meet the requirements for a suspected case, as well as a positive test.

They may have put this new definition into practice earlier because after a massive addition of almost 16,000 confirmed cases on February 12th, the number fell dramatically each day and, by February 18th was under 500 cases, and continued to stay low. But other countries did not learn. Korea, Japan and Italy (and perhaps other countries) have started doing tests on people with no epidemiological link, encouraging people with the vague symptoms that are part of the definition to come to hospital to get checked, and obviously following up with anybody with a connection to them, most of whom will be asymptomatic.

Consequently, in mid to late February, cases in those and other countries started to skyrocket. A New Disease? C 19 is described as a distinct new disease. But it clearly is not. There are no distinctive symptoms, for a start. Reference showed that, among 41 early cases, the only symptoms found in more than half, were fever (98%) and cough (76%). 98% had CT Scan imaging showing problems in both lungs (although it is possible to have shadowing on a CT scan without symptoms). The high percentage of cases with fever and shadowing in both lungs is an artefact of the disease definition, fever and "radiographic evidence of pneumonia" are two of the diagnostic criteria for a probable case. The low rate of people testing positive on the C 19 test is further evidence that there are no obvious symptoms. If there were

recognizable symptoms, doctors should have a better than 3-5% chance of guessing who has the virus.

While some of the people may have been tested, without symptoms, because they were on a flight or cruise, countries outside China are encouraging people with the non-specific symptoms of fever and cough to get tested, so increasingly people have symptoms of the flu or pneumonia, but are still testing negative in high numbers. For example, as of March 9th, Korea had found 7,382 positive cases out of 179,160 people tested (4.1%). In Washington State, where they appear to be reluctant to test anyone, only 1 out of 27 tested by February 24th had tested positive (3.7%).

Perhaps if they had tested all 438 who were then under quarantine, the epidemic would have exploded from 1 to about 16 cases (3.7% of 438). By March 9th, 1,246 tests had been performed in Washington with 136 found positive (11%). Obviously, in neither location can doctors recognize cases clinically. Testing Assuming, for a moment, the existence of a new CV, what would a test tell us, at this stage? Or rather, what does it not tell us?

Without purification and exposing animals to viral particles we do not know if the virus is pathogenic (disease causing). It could be an opportunistic infection (invades unhealthy people with weakened immune systems) or a passenger virus (that is carried along by risky behavior, such as eating an animal carrier of a virus).

We do not know the false positive rate of the test without widespread testing of healthy people far from places where people are being diagnosed with this possible new disease. If the test is 99% accurate, in a city of over 10 million, like Wuhan, there would be about 100,000 false positives (1%). It is easy to generate a false epidemic if you just keep testing like this. And it is worse if you restrict the test to people with symptoms, because then the flaws in the test will not be revealed for longer.

If someone is sick there is no proof that any or all of their symptoms are due to the virus, even if it is present. Some people may be immune, some may

have some symptoms caused by the virus, but others caused by the drugs they are given, by pre-existing health conditions, and so on.

We do not know if the people who test negative are infected or not, especially when they show up with similar symptoms. For example, in, out of 59 patients with similar symptoms, only 41 tested positive, but the researchers were clearly not sure whether the remaining 18 were truly uninfected. If they truly are not, they lend weight to C 19 not being the cause of any of the illnesses, as they had symptoms indistinguishable from the 41 positives. Testing at such an early stage of knowledge is incredibly dangerous. It spreads panic, it can put people on dangerous medications, other circumstances of their treatment can be physically and psychologically damaging (such as intubation and isolation, and even seeing all the doctors and nurses in special suits emphasizing how deathly sick you are).

False Negatives – Big Problem

According to an article in the South China Morning Post [23], Li Yan, head of the diagnostic center at the People's Hospital of Wuhan University, noted on Chinese state TV that because of the multi-step process, an error at any stage could result in an incorrect outcome. This was echoed by reference [26] which noted the possibility of errors in the many steps from the time of specimen collection through processing. Wang Chen, president of the Chinese Academy of Medical Sciences, also on CCTV, said the accuracy is only 30 to 50 percent.

Wang Chen really means, however, that the test only ever produces false negatives, and never false positives. In a paper documenting a cluster of illness and positives tests in a family, this bias is clear, as most patients had more negative tests than positive tests but were considered positive anyway. Patient 1 had 3/11 positive 9 (27%), patient 2 had 5/11 (45%), patient 3 had all 18 negative, patient 4 had 4/14 (29%), patient 5 had 4/17 (24%) and patient 7 was the only with a majority positive (64%).

The only way to decide logically and scientifically is to have a gold standard for presence of the virus, which can only be purification and

characterization (identification of the RNA and proteins). Since this has never been accomplished, doctors get to make decisions on the fly, biased towards treating patients as infected.

False Positives – Best Evidence

The first major attempt to define the false positive rate was in a paper describing a new test methodology, but it has a built-in conflict of interest. Clearly, if the false positive rate was high, the authors' aim to "develop and deploy robust diagnostic methodology for use in public health laboratory settings", would have failed. They did, however, do more than most. They took 297 samples of nasal and throat secretions from biobanks and tested them, only finding "weak initial reactivity" in four samples which, upon retesting, disappeared. The problem with this kind of analysis is that biobank samples may not have been obtained in the same way as samples from live people in an epidemic panic.

The sampling was also not blinded, something that is necessary to eliminate the possibility of unconscious bias (a real problem in medicine). Furthermore, many samples in people believed to be infected are negative, and multiple samples are tested, as described for the family cluster paper. RNA is fragile if not stored carefully, and this would cause false negative results. No information on whether the samples were stored in a way designed to maintain RNA integrity was given. In sum, testing 297 samples could, at best, show that the false positive rate was 1/300, but because multiple samples are often taken in current C 19 test protocols, with any one positive sample over-ruling all the negatives, the false positive rate could be considerably less, as the biobank samples were only tested once.

And, even if this test did have a false positive rate that was extremely low, it is not clear this particular test's false positive rate cannot be extrapolated to any other test design. Even a small false positive rate is critically important. A 99% accurate test would produce 100,000 false positives in a city of 10 million, like Wuhan. And if the number of positives in sampling is around 4% (which it appears to be from early statistics), then 1 out of 4 positives would be false.

Finally, on March 5th, 2020 some Chinese scientists dropped a bombshell. According to their analysis, based on reasonable assumptions for asymptomatic people (e.g. contacts of other cases), "the false-positive rate of positive results was 80.33%". This is based on a mathematical analysis using reasonable assumptions for the actual prevalence of the virus, and the performance of the test. 10 The best case, with the most optimistic assumptions, was still more than 40% false positives.

Positive, Negative, Positive Again – Confusion

Some people have fully reC 19ered from illness blamed on C 19, started to test negative, and then tested positive again. According to a news report patients are not considered cured in China until they no longer have symptoms, have clear lungs, and have two negative C 19 tests. Despite this, 14% of discharged patients in Guangdong Province later tested positive, but with no relapse of symptoms. This is exceedingly difficult to explain if the test is for a virus, much easier to explain if the RNA that the test is looking for is not viral in origin. Later analysis showed similar results in Wuhan, with 5-10% declared to be "reC 19ered" (negative tests after cessation of symptoms) later tested positive, often without symptoms.

Chinese scientists reported that 29 out of 610 patients at a hospital in Wuhan had 3-6 test results that flipped between Negative, Positive, and 'Dubious' (undefined, but probably means a PCR cycle number between positive and negative). One patient, for example had three negative tests interspersed by two positive tests. Others had one test result in each of the three categories. Other confusing test results are listed in Appendix A.

Negative, Negative, Negative

A group of doctors in Marseille, France, working in a very experienced lab, that regularly does testing for respiratory viruses, reported testing 4,084 samples for C 19, using several systems approved for use in Europe, without a single positive [25]. This included 337 people returning from China who were tested twice, and 32 people referred because of suspected infection. It is statistically improbable that this lab was just lucky to not get any C 19 cases, it

is more likely that they used more stringent criteria, illustrating that the performance of not just test kits, but labs, with this new test, is completely unknown. Yet, a positive test remains unquestioned in every case.

Preserve the Test

Overall, it seems that test results must be interpreted to preserve the CV theory. No alternative interpretation is allowed. And when there is an inconsistency, it must be ignored or explained away, often invoking imaginary data. These situations are listed in Appendix C.

Test Experience

A paper from Singapore by doctors and public health officials provides a revealing look at the inner guts of C 19 testing. Hidden away in the supplementary 3 The abstract was eventually withdrawn, but without any explanation, indicating it was a political removal. The original Chinese language article was not retracted by the journal. This may be the first time ever that an abstract alone has been withdrawn. 11 material of reference, where few people will see it, it exposes some important issues with tests:

• The test is not binary (negative/positive) and has an arbitrary cutoff.

• The quantity of RNA does not correlate with illness.

• If negative means uninfected and positive means infected, then people went from infected to uninfected and back again, sometimes several times.

• Results below the cutoff are not shown, and are treated as negative, but if PCR continued past the cutoff and was eventually positive, this would indicate presence of small quantities of the RNA which is supposedly unique to C 19 (i.e. infection).

--https://theinfectiousmyth.com/book/CVPanic.pdf

HOW TO DECLINE THE C 19 VACCINE: USE THE LAW AGAINST THEM

When the time comes, do not "refuse" vaccinations or else you will be considered belligerent and may incur severe legal reprimanding. You must politely "decline" and refuse consent

Present this paper with the following notification and questions to the doctor or nurse attempting to administer the C 19 Vaccine to you:

"I have a pre-existing allergic condition, as well as pre-existing sensitivities to certain vaccine ingredients, which can lead to life threatening **Iatrogenic Reactions,** as well as potentially lethal **Anaphylactic Shock.** Before receiving any vaccines, I have been advised by multiple prior physicians to inquire about the ingredients in any vaccine I receive, as a matter of personal health.

Please, provide me with a with a list of this vaccine's ingredients so that I may verify with a previous personal physician whether life-threatening contraindications leading to **Anaphylactic Shock** could result from the combined components within this vaccine. If the vaccine contains any of the following ingredients, the chances of me experiencing an Iatrogenic Reaction are considerably high, as well as triggering Anaphylactic Shock, with the chance of death as a result of receiving this vaccine, wherein I am forced to decline this vaccine on grounds of personal health and survival.

Subsequently, does this vaccine contain any of the following:

A. Vaccine antigens
B. Residual animal protein
C. Antimicrobial agents
D. Preservatives
E. Egg protein
F. Gelatin
G. Milk proteins
H. Tree nuts

I. Shellfish
J. Natural rubber latex residue from gloves holding a syringe, which can be contained in the syringe plunger, the tips on prefilled syringes, and vial stoppers

Additionally, please answer the following question regarding this vaccine, as your answer will determine whether it is safe for me to receive it:

Is there a possibility of any degree of Iatrogenic Reaction from this Vaccine? (Iatrogenic Reactions are the result of diagnostic, therapeutic, and/or pharmaceutical procedures undertaken on a patient.)

If so, I must decline this Vaccination."

When the time comes, present the preceding letter so you can politely "decline" and refuse consent to being vaccinated.

Iatrogenic Disease: The Silent Killer

Iatrogenic disease is the third leading cause of death in the United States, only surpassed by heart disease and cancer. Iatrogenic diseases are the results of diagnostic and therapeutic procedures undertaken by a patient, in other words, they are doctor caused illnesses. About 250,000 people die a year due to poorly doctor prescribed medication and medical errors. By comparison, the Poison Control Centers of the United States reported that vitamins, minerals, amino acids, essential fats, herbal remedies and homeopathic has no reports of deaths or even poisoning. Because of the number of drugs prescribed to a single patient to treat a single or several conditions, adverse drug reactions are likely to occur and cause pathologies independent of the conditions for which the

treatments were meant for. Diagnostic and invasive procedures, like drugs and surgery, as well as hospitalization, and even the treating doctors themselves can bring about iatrogenic disorders. Adverse drug reactions are defined by World Health Organization as any reaction of a drug which is harmful and potentially unintended, it occurs in prescribed doses normally used for prevention, diagnosis, and the treatment of disease. Generally, the more drugs a patient is prescribed, the more likely the possibilities of contracting an iatrogenic disorder.

One of the most common and dangerous iatrogenic threats is the possibility of anaphylaxis, which is a very serious and life-threatening allergic reaction. Penicillin, some antibiotics, human insulin, and several types of vaccines, are the most common agents that cause anaphylaxis. Drug induced liver injuries are potential complications of nearly every medication because the liver metabolizes all drugs that go into the human body. The kidney is the organ that is in charge of removing excessive and unnecessary materials from the body, and therefore is also affected by most drugs. Neuroleptic malignant syndrome, a life-threatening reaction neuroleptic and antipsychotic medication, is one of the serious iatrogenic complications. Symptoms include rigidity, hyperthermia, catatonia, and easily altered blood pressure. Antihistamines, amphetamines, and most narcotics can cause psychiatric symptoms, like drowsiness, delirium, hallucinations, depression, mania, and paranoia. Other treatments like radiotherapy, estrogens, anabolic steroids and even oral contraceptives can lead to malignant diseases like leukemia, breast and liver cancer. Acquiring infections in hospitals is very common, urinary tract infections and respiratory infections are the most regular to behold. The chances of undergoing infections associated with diagnostic and therapeutic procedures and with antibiotic resistant bacterial flora are high. The harm that a doctor can inflict includes but is not limited to the imprudent use of medicine or a medical procedure. Doctors should be aware of the properties of the drugs prescribed and their potential dangers. Ignorance of the possibility of a reaction is evidence of negligence, and it's more common than the public would like to believe. Patients should be warned of the likely side effects different treatments can induce.

Vaccines are amongst the most common drugs that lead to iatrogenic diseases. In mild cases, vaccines cause a local reaction to the inoculated section and fever. Parents are usually ill-advised to administer acetaminophen or ibuprofen to children after vaccination to prevent the fever and discomfort. Fevers are the most common and even expected reactions to vaccinations. In other more serious cases, vaccines can cause a soft tissue infection called suppurative lymphadenitis, which affects muscles, ligaments, nerves, fibrous tissue, and blood vessels. Other severe reactions include encephalopathy, hypersensitive reactions, toxic shock syndrome and abscess.

The problem is that for-profit corporate entities influence the promote all types of medications, including vaccines. This means that for-profit companies control every type of treatment in modern Western medicine. There is evidence that negligence in laboratories and the economic interests of these pharmaceutical companies interfere with people's health, the treatments they receive and the medicines they are prescribed. These special interests make iatrogenic diseases unavoidable in traditional medicine.

Regarding vaccines, the sector of the population most affected by monetary interests are children, who are the most commonly vaccinated people. Children are physically, neurologically, and immunologically immature, this can allow harsh brain damage and other complications that manifest in any number of chronic iatrogenic vaccine induced disorders of which pharmaceutical companies neglect to inform the public of. Toxic vaccine ingredients can cause chemical and inflammatory trauma to the brain that resembles cerebral contusions, which is why many cases of vaccine injuries can be mistaken for "shaken baby syndrome".

Medical Fraud That Causes Death

The CDC's Advisory Committee on Immunization Practices and the FDA's Vaccines and Related Biological Products Advisory Committee are composed largely of academic physicians that usually have a conflict of interest.

The members of committees are usually academics and tend to be highly respected figures within the medical community. Their recommendations dictate the mainstream and even required standards of health for the rest of the population.

In 1986, Ronald Reagan signed the National Childhood Vaccine Injury Act, a law which prevents the parents of vaccine-injured children to sue the responsible vaccine corporations and vaccine promoters. This protection from liability has allowed pharmaceutical companies to continue producing all types of medicines, not just vaccines, with very flexible standards. Furthermore, this law acknowledges that federally licensed and recommended vaccines mandated by states for children to attend school can and do cause injury and death.

Nowadays, pharmaceutical companies do not usually fund or conduct their own researches. Most of the foundational research on the development of new drugs is done with public dollars through universities and academic settings. These corporations rely on publicly funded research, then turn around and make a hugely significant profit off the findings. Essentially, the public, through tax money, is acting as an early investor in the production of new drugs that are then privatized by multi-billion-dollar companies and receive no return on their investment. Not only does the public then have little to no access to the medicines they are investing in, but when they do get access they are submitted to the dangers of iatrogenic diseases and potential financially devastating outcomes due to the incredibly inflated medicine and treatment prices. It is commonly said that getting sick is for the rich, and these pharmaceutical companies are currently ensuring this statement remains true.

Iatrogenic diseases represent a great threat to people's health all around the world. New medications are constantly being released to the market, and the misguided usage of painkillers, antibiotics, steroids, vaccines, and other unnecessary surgical or therapeutic procedures remains the norm. It's important to be reminded that many of these drugs actually cause harmful side effects more often than medical institutions and their representatives would like to admit. Furthermore, the fact is that most of the adverse drug reactions tend to be unrecorded.

--https://www.theholisticsanctuary.com/holistic/iatrogenic-disease-the-silent-killer/

Anaphylaxis after Vaccination

- J Allergy Clin Immunol. Author manuscript; available in PMC 2017 Mar 1.
- Published in final edited form as:
- J Allergy Clin Immunol. 2016 Mar; 137(3): 868–878.
- Published online 2015 Oct 6. doi: 10.1016/j.jaci.2015.07.048

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Methods

Using health care data from the Vaccine Safety Datalink, we determined rates of anaphylaxis after vaccination in children and adults. We first identified all patients with a vaccination record from January 2009 through December 2011 and used diagnostic and procedure codes to identify potential anaphylaxis cases. Medical records of potential cases were reviewed. Confirmed cases met the Brighton Collaboration definition for anaphylaxis and had to be determined to be vaccine triggered. We calculated the incidence of anaphylaxis after all vaccines combined and for selected individual vaccines.

Conclusion

Anaphylaxis is an acute, systemic, and potentially lethal hypersensitivity reaction to vaccines with multiple organ system involvement. Anaphylaxis can

occur after exposure to allergens from a variety of sources, including food, venom, drugs, and immunizations. Virtually all vaccines have the potential to trigger anaphylaxis. Recently, a committee of the Institute of Medicine (IOM) concluded that epidemiologic and mechanistic evidence convincingly supports a causal relationship between Anaphylaxis and the majority of childhood and adolescent vaccines, including the:

1) Measles vaccine
2) Mumps vaccine
3) Rubella [MMR] vaccine
4) Varicella vaccine
5) Influenza vaccine
6) Hepatitis B vaccine
7) Diphtheria toxoid
8) Tetanus toxoid
9) Acellular pertussis antigen-containing vaccines
10) Meningococcal vaccine

Vaccine components that might be allergenic include the vaccine antigen, residual animal protein, antimicrobial agents, preservatives, stabilizers, or other vaccine components. Individual vaccine components that have been implicated in acute vaccine reactions include egg protein, gelatin, milk proteins, and potentially other additives. Natural rubber latex, which can be contained in the syringe plunger, the tips on prefilled syringes, and vial stoppers, is another potential cause of anaphylaxis.

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https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4783279/

BREAKING NEWS: The WHO, The CDC, and Gates Foundation Defunded Because of Vaccine Fraud

(U.S. Government lost LANDMARK VACCINE LAWSUIT in 2018.)

Vaccine injury lawyer Robert F. Kennedy Jr., Del Bigtree, producer of the suppressed vaccine documentary, 'VAXXED' and the Informed Consent Action Network (ICAN) are credited with this victory.

They demanded the relevant government documents proving that all federally approved vaccines had been tested for quality over the past 32 years — and there were NONE! Zero, zilch, nada!

Here are the huge legal and practical implications in this victory for the American people:

This means that the US Department of Health and Human Services and all vaccine makers have been deceiving the American people for over 30 years about the effectiveness and safety of vaccines.

This may ultimately mean that the continuing existence — at least in their current form — of five US "healthcare" agencies is now in doubt: the CDC, the FDA, the IOM, the NIH, and the "Health" part of DHHS itself.

This may also threaten the existence of state medical boards and exclusive medical guilds like the AMA.

This means that vaccine makers have been fraudulently exempt from what all other pharmaceutical drug makers have been forced to do concerning biannual recertification for quality and effectiveness — meaning that their vaccines have never been tested for quality and have had no proven safety or effectiveness for over 30 years.

This case can now be legally cited by all parents fraudulently mandated by any government/ organizational regulation/ requirements that they must vaccinate their children for school or any other activity to stop the forced vaccination of their children.

This case can now be legally cited by all employees being mandated by their employers to be vaccinated in order to retain their jobs.

This case can now be legally cited by all those who seek compensation for vaccine injury.

The future of allopathic medicine in its current form is now in doubt, and the global pharmaceutical cartel, since almost all of the drugs allopathic practitioners prescribe come from pharmaceutical corporations that have also committed vaccine fraud and injury. (edited)

Liability:

All government officials who have passed laws legalizing vaccine fraud at the state, national, or international level, or otherwise aided and abetted this vaccine fraud can now be charged with vaccine fraud, criminal malfeasance and in some cases, war crimes under the Nuremberg Code.

Source:

U.S. Department of Health and Human Services.

--Reporting: Bonnie Nirgude' with Linda Forsythe

Antoine Bechamp: Vaccines Are Toxic (Poisonous)

Vaccines are based upon the "antibody theory" and the "germ theory of disease." Both of these theories are totally false. First of all you cannot and do not "catch" germs, bacteria, or viruses, nor can you "catch" candida overgrowth or cancer. The following text disproves the "Germ Theory of

Disease" as promoted by the medical industry today, which was started by Louis Pasteur in the early 1800s.

Louis Pasteur was a French microbiologist and chemist, born on December 27, 1822 in Dole, in the region of Jura, France. His disC 19ery that most infectious diseases are caused by germs, known as the "germ theory of disease," became the foundation for the science of microbiology, and a cornerstone of modern medicine.

"Pasteur also developed 'pasteurization', which was named after him. Pasteurization is a process by which harmful microbes in perishable food products are destroyed using heat, without destroying the food." However, this is not true. Pasteurization damages food by destroying natural enzymes and nutrients in them.

However, Louis Pasteur was not an honest creditable individual. If you look back into the history of the medical profession and the various ideas regarding the cause of disease that were held by leading physicians before Pasteur first declared his notorious "germ theory", you will find convincing evidence that Pasteur disC 19ered nothing, and that he deliberately appropriated, falsified and perverted another man's work.

His true character and methods were brought to light by Miss Ethel Douglas Hume in her book "Pasteur or Bechamp" written in 1923, the title of which has since been changed to Pasteur Exposed.

It was Antoine Bechamp (1816–1908), a contemporary of Pasteur, who disC 19ered the true nature of germs, bacteria, fungi, etc. and that they change form, called pleomorphism. He disC 19ered they all arise from microbes called microzymas (tiny microbes) which exist everywhere in nature and are found in all animals, fish, insects, human bodies, soil/dirt, and on plants, rocks, and surfaces everywhere on Earth.

When it comes to the antibody theory please remember that antibodies are tested only in a laboratory, and as the article "Jabs and Journeys" states: ". . . vaccinations [to build up antibodies] are artificial procedures which can be

found to be protective in artificial situations. What we want to know is how effective are they in the real world? The laboratory can tell us little about this."

This, in addition to the fact that the medical community follows these antibody rules:

1) High antibodies equal an allergy.
2) High antibodies equal immunity.
3) However, in the case of HIV high antibodies means you are infectious!

That does not make sense! The rules change when it comes to HIV/AIDS? Yet the opposite is true for all other diseases? The fact is:

People who are the most immune have low antibodies levels.

If HIV tests were not diluted to a ratio of 1:400 everyone would have infectious HIV.

Antibody allergy tests are based upon the theory that high circulating levels of IgG antibodies correlate with clinical food allergy signs and symptoms, however high serum levels of IgG and other allergy tests has not been studied, nor verified, therefore it is quite a leap to conclude that IgG to food antigens correlates to signs and symptoms of food allergy. Also, the fact is that laboratories do not use pure food antigens to test blood samples from patients.

Also, all "so-called" allergic reactions are exactly the same list of symptoms as the list of healing reactions created by the body – see Healing Reactions Versus Allergic Reactions and Healing Foods, Herbs and Spices Create Healing Reactions.

Vaccines introduce toxins (poisons) into the body and make people sick since the body reacts to them like it reacts to all poisons—How Our Bodies React to Poisons (Toxins). There is proof that vaccines cause autism in children and that vaccines have never helped eradicate any disease, contrary to reports and statistics by governments and the drug and medical industries. See Antibody Theory Defies Logic and The Vaccine Website.

-- https://www.healingnaturallybybee.com/vaccines

Herd Immunity Discussion Assuming the Epidemiological Reality of C 19

The top box shows an outbreak in a community in which a few people are infected (shown in red) and the rest are healthy but unimmunized (shown in blue); the illness spreads freely through the population. The middle box shows a population where a small number have been immunized (shown in yellow); those not immunized become infected while those immunized do not. In the bottom box, a large proportion of the population have been immunized; this prevents the illness from spreading significantly, including to unimmunized people. In the first two examples, most healthy unimmunized people become infected, whereas in the bottom example only one fourth of the healthy unimmunized people become infected.

Herd immunity (also called herd effect, community immunity, population immunity, or social immunity) is a form of indirect protection from infectious disease that occurs when a large percentage of a population has become immune to an infection, whether through previous infections or vaccination, thereby providing a measure of protection for individuals who are not immune. In a population in which a large proportion of individuals possess immunity, such people being unlikely to contribute to disease transmission, chains of infection are more likely to be disrupted, which either stops or slows the spread of disease. The greater the proportion of immune individuals in a community, the smaller the probability that non-immune individuals will come into contact with an infectious individual, helping to shield non-immune individuals from infection.

Individuals can become immune by reC 19ering from an earlier infection or through vaccination. Some individuals cannot become immune due to medical reasons, such as an immunodeficiency or immunosuppression, and for this group herd immunity is a crucial method of protection. Once a certain

threshold has been reached, herd immunity gradually eliminates a disease from a population.

This elimination, if achieved worldwide, may result in the permanent reduction in the number of infections to zero, called eradication. Herd immunity created via vaccination contributed to the eventual eradication of smallpox in 1977 and has contributed to the reduction of the frequencies of other diseases. Herd immunity does not apply to all diseases, just those that are contagious, meaning that they can be transmitted from one individual to another. Tetanus, for example, is infectious but not contagious, so herd immunity does not apply.

--Wikipedia

The Pro Vaccine, Pro-Herd Immunity Argument

The other day I shared a fantastic infographic, and I was asked by a few people to elaborate. You may have heard about herd immunity (when I was in high school, we actually had a science project dedicated to it), but there's a good chance that you have never really had it explained.

It really is a great infographic; there is also a cool simulation at The Guardian, who made the thing

Herd immunity is a public health term that is one of the most important parts of the theory behind vaccination. It basically means the point at which there are enough people immune to infection to prevent people who are not immune from getting infected. It is the reason that we don't have to vaccinate every person to stop everyone from getting measles.

Pretty damn cool, I would say.

A lot of herd immunity is about maths. I've handily italicized the maths for anyone who hates numbers. Skip away!

Attack Rates, Reproduction Numbers, and Scary Maths:

As well as being one of my favorite public health terms, attack rate is a key part of herd immunity. It is a measure of the proportion of people who are infected by a disease in the population. Say there is a measles outbreak in a school of 100 kids. If 10 of those kids get measles, the attack rate is 10/100=10%. It is a pretty simple metric to see how many people are infected in a population by a specific disease.

Along with the attack rate we can calculate a Reproduction Rate for the disease we are looking at, commonly called Ro. This reproduction rate is simply the number of individuals that are infected by each person who contracts the disease. The higher the number, the more people get infected

Measles has a remarkably high reproduction rate, at 12–18 people infected, mumps is much lower at 4–7. On average, each person who has measles will infect about 3x as many new people as each person with mumps

Herd Immunity

Most diseases are infectious for a week or so, although it varies greatly. Imagine you catch measles. You are infectious for a couple of days whilst only feeling minor symptoms (cough, runny nose). You then come down with a nasty fever, and after seeing the doctor stay at home for the rest of your infectious period.

In this example, you've limited your contact with uninfected people by staying at home once you realized you were sick. Even so, you are still likely to have infected a significant number of people whilst you were wondering around, blissfully unaware.

But what if these people were vaccinated? If the vast majority of people you ran into on the street were already immune to catching measles, you might only pass on the disease to one person before going home. If they were all vaccinated, the outbreak of measles would stop with you.

This leads us to the Effective Reproduction Rate (called R). This is the rate at which a disease will spread given the percentage of a population that is

already immune. It's just the reproduction rate multiplied by the % of the population susceptible to the disease; if the Ro for measles is 18, and half of the population is immune, then R is 18x.5=9. In this population, each infected person will only pass on measles to 9 people, rather than 18.

This is how we calculate herd immunity. For a disease to be considered stable, each person can only on average infect 1 or fewer other people. In other words, R has to be less than or equal to 1.

For measles, Ro is 18. Therefore, 18x%=1, or 1/18=%. This means that the % of people who need to be vaccinated to prevent the spread of measles in a population has to be higher than 1–1/18, or ~95%.

This is how herd immunity works. It's a simple mathematical function; if enough people are immune to a disease, it cannot spread beyond the initial infected person and dies out.

Why do people still get sick?

The first objection you will always hear when talking about herd immunity is "people aren't cows". This is stupid.

The second, less stupid objection is "people do still catch measles/mumps/German measles/love of the dance/typhoid/etc! That means herd immunity can't work!". Basically, if everyone is vaccinated (and vaccines work), then how can anyone get sick?

Firstly, herd immunity is a simple mathematical function. The immunity can be conferred either through vaccination or just natural immunity; most diseases peter out without vaccination around the 90% infected mark, simply because enough people become immune.

The second reasons are simple; vaccination rates are often just not high enough to fully prevent diseases, particularly overseas. Some countries have had disease 'eliminated', which means that there is no reservoir of disease in the country, but many have not reached this point. Most of the disease outbreaks you see are people getting sick overseas and bringing it back to a vulnerable community who do not have sufficiently high vaccination rates.

Why it matters

Herd immunity is important for one reason; not everyone can get vaccinated. For example, people who are undergoing chemotherapy for cancer have compromised immune systems and can get extremely sick if they receive certain vaccines.

But if enough people are vaccinated, they will be protected anyway.

Australia has some of the best vaccination rates in the world, with most areas topping 95% for the recommended vaccines. We have incredibly low rates of vaccine-preventable disease because of this.

But there are some communities who, for a number of reasons, have lower vaccination rates. Some of them have socio-economic issues with attending the doctor. Some think that vaccines are a secret government plot to make us into docile sheep*.

Ironically, sheep are not fond of vaccination at all, the silly buggers

Whatever the reason, these communities lower the rates of protection, and end up putting us all at risk. Which is shit, because when people do not get their vaccines, the most vulnerable are the first to suffer.

So, protect the babies, old people and chemo patients and get your vaccines. You are probably due for a booster right now.

--Gideon M-K; Health Nerd, Epidemiologist.

The Pro Vaccine, Anti-Herd Immunity Argument

Here's Why Herd Immunity Won't Save Us from the C 19 Pandemic

It's hard to predict things in a pandemic. The situation changes so much on a daily basis that everything you thought you knew last week is wrong by the end of the day. Things are changing so fast that even the solid certainties that

we thought we were sure of – the reproductive rate, the symptoms of the infection, the key to making a good quarantine – are suspect and need to be re-evaluated.

But among all this uncertainty, I can say for sure that there is one thing that I would never have seen coming: the discussion about herd immunity. It is so out of the blue that the first time a journalist asked my opinion on whether it was effective for the CV, I literally laughed out loud because I assumed, they were joking.

And yet, here we are. Countless articles and think-pieces on the C 19 virus are making the argument that, albeit potentially risky, achieving herd immunity could be one response to our crisis. Many of them frame herd immunity as a preventive strategy that may stall the tidal wave of disease so many are predicting.

All of this is simply nonsense. Herd immunity without a vaccine is by definition not a preventative measure.

Let me explain.

Herd immunity is an epidemiological concept that describes the state where a population – usually of people – is sufficiently immune to a disease that the infection will not spread within that group. In other words, enough people can't get the disease – either through vaccination or natural immunity – that the people who are vulnerable are protected.

For example, let us think about mumps. Mumps is a very infectious disease that, while relatively benign, is extremely uncomfortable and sometimes causes nasty life-long complications. It is also vaccine-preventable, with a highly effective vaccine that has made the disease incredibly rare in the modern age.

Mumps has a basic reproductive rate (R0) of 10-12, which means that in a population which is entirely susceptible – meaning no one is immune to the virus – every person who is infected will pass the disease on to 10-12 people.

This means that without vaccination roughly 95 percent of the population gets infected over time. But even with something that is this infectious, there are still some people – 5 percent of the population – who do not get sick, because once everyone else is immune there's no one to catch the disease from.

We can increase that number by vaccinating, because vaccination makes people immune to infection, but it also stops infected people passing on the disease to everyone that they otherwise would. If we can get enough people immune to the disease, then it will stop spreading in the population.

And that's herd immunity, in a nutshell.

For mumps, you need 92 percent of the population to be immune for the disease to stop spreading entirely. This is what is known as the herd immunity threshold. C 19 is, fortunately, much less infectious than mumps, with an estimated R0 of roughly 3.

With this number, the proportion of people who need to be infected is lower but still high, sitting at around 70 percent of the entire population.

Which brings us to why herd immunity could never be considered a preventative measure.

If 70 percent of your population is infected with a disease, it is by definition not prevention. How can it be? Most of the people in your country are sick! And the hopeful nonsense that you can reach that 70 percent by just infecting young people is simply absurd. If only young people are immune, you would have clusters of older people with no immunity at all, making it incredibly risky for anyone over a certain age to leave their house lest they get infected, forever.

It is also worth thinking about the repercussions of this disastrous scenario – the best estimates put C 19 infection fatality rate at around 0.5-1 percent. If 70 percent of an entire population gets sick, that means that between 0.35-0.7 percent of everyone in a country could die, which is a catastrophic outcome.

With something like 10 percent of all infections needing to be hospitalized, you would also see an enormous number of people extremely sick, which has huge implications for the country as well.

The sad fact is that herd immunity just is not a solution to our pandemic woes. Yes, it may eventually happen anyway, but hoping that it will save us all is just not realistic. The time to discuss herd immunity is when we have a vaccine developed, and not one second earlier, because at that point we will be able to really stop the epidemic in its tracks.

Until we have a vaccine, anyone talking about herd immunity as a preventative strategy for C 19 is simply wrong. Fortunately, there are other ways of preventing infections from spreading, which all boil down to avoiding people who are sick.

--Gideon Meyerowitz-Katz is an epidemiologist working in chronic disease in Sydney, Australia.

Why Not Let Everybody Get Infected to Create Herd Immunity?

As the impact of social distancing is being felt in dwindling economies, stir-crazy households and cash-starved businesses around the world, discussions of creating herd immunity have arisen, begging the question: Could letting everybody out be a quicker way out of this mess?

What that would look like is basically what is happening in Sweden — people practicing some degree of social distancing but restaurants and bars remaining open, borders remaining open and lots of businesses carrying on as usual while, in theory, the virus that causes C 19 infects so many people there are not enough hosts left for it to survive.

According to Swedish epidemiologists, herd immunity in that country could be established within two weeks.

But the Swedish experiment is filled with holes, said Dennis Carroll, senior fellow at the Bush School of Government and Public Service at Texas A&M University, formerly a senior infectious diseases advisor for the U.S. Centers for Disease Control and Prevention.

"Sweden started acting like they were in Las Vegas," Carroll said. "Basically, they took a big gamble without any information like whether there is protective immunity for C 19 and which populations need to be protected."

Protective Immunity

Several ingredients are required for herd immunity to work, Carroll said. The first is that people have developed protective immunity.

The best way to do that, with many diseases, is with a vaccine — enough people are immunized with antibodies to halt the disease's spread.

Think of measles, a disease that once you've had it, you'll never have it again. Or the measles vaccine that, when widely used, effectively prevents the disease from reappearing.

"With measles, there's a sterilizing immunity that's long-lasting," said Dr. Richard Rupp, professor of pediatrics at the University of Texas Medical Branch.

"With herd immunity minus a vaccine, it depends on the notion that once you've had it, you don't get it again," Rupp said.

Bottom line: We do not know that about C 19, he said.

Other CVes, such as those that cause the common cold, occur repeatedly, some as often as every year.

"We get them over and over again," Rupp said. "Having the infection doesn't generate longstanding herd immunity."

C 19, a brand-new CV, has not been investigated enough at this point to determine whether it behaves the same as seasonal CVes.

“If it turns out that it’s more like seasonal CVes or influenza or a whole bunch of viruses we get over and over again in our lifetime, there really won’t be big role for creating herd immunity for C 19,” Rupp said.

Protecting the Vulnerable

The second ingredient for creating successful herd immunity is measuring the adverse effects, Carroll said.

“Can we begin to differentiate between populations that are more vulnerable to illness and death if infected? We’re getting clear information on this about C 19,” he said. “Most deaths are really occurring among people 60 years or older, and people with preexisting conditions like heart disease and diabetes.”

If the first criteria is met and it turns out C 19 does give protective immunity to those it infects, communities could then think about letting all people out or asking whether some people need to be held back.

“You’d have to hold back the high-risk groups,” Carroll said.

Sweden’s casual approach has led to the highest C 19 mortality numbers in Scandinavia, Carroll said. That is because they were sloppy about protecting elderly people in nursing homes and adequately protecting those at high risk, he said.

“To create a successful herd immunity, if it all lines up and you can clearly state that 50 to 60 percent of the population have protective immunity, you’d let all the people under 60 or so, all the people not living with heart disease or diabetes back to work and out in the world, and the rest would stay at home. Then when everybody else has been infected, you start letting those at risk out,” Carroll said.

The idea is that when a big enough portion of the population has immunity against the virus, the virus has nowhere to go and transmission stops, Rupp said.

“If your body is immune, the virus needs to get into the next person. And if it does not do that, it dies in you,” he said. “If you’re only surrounded by immune people, the virus can’t keep going.”

A Unified Strategy

The two big ifs required to create a successful herd immunity — protective immunity from the virus and protection for the most vulnerable — precede other considerations a community must think about before it decides to just let everybody go their way.

One of those considerations is mobility and whether there are people moving in and out of a community who may not have protective immunity.

Galveston is a good example — a place with a relatively small population on an island but with millions of tourists coming and going on a regular basis.

“Let’s assume Texas goes for her immunity and you get 60 percent of the population with protective immunity, but then there are all these other people flying in from all over the place and that messes everything up,” Carroll said.

That is why a well-considered, unified, and coordinated national approach is necessary for any kind of strategy, such as establishing herd immunity, to work, and we don’t have one, he said.

“A strategy like this needs to be seriously considered. We can’t be locked down forever,” Carroll said. “But we need to make sure of many things first.”

One of those things is an adequate supply of antibody testing that’s high quality, he said.

Antibody tests would show, among other things, who in the population already has been infected and, presumably, has protective immunity, at least until a vaccine is developed.

But the tests need to be consistently reliable. Problems with early antibody tests related to C 19 documented in a recent New York Times report include loose Food and Drug Administration regulation, allowing manufacturers to validate their own tests and risking a market flooded with inconsistent tests; confusing federal guidance about how to use the tests; and tests with a false high positive rate.

"The tests right now are all over the place," Carroll said. "All of that needs to be tightened up so we can get clearer answers."

-- By Kathryn Eastburn, The Daily News, Apr 27, 2020

Is a Herd Immunity Approach to the CV Outbreak a Viable Option?

Whilst "thinking out loud" in a press conference last week, the UK Government raised the role that herd immunity could play in the fight against the current CV pandemic. It has been estimated that 60% of the population would need to be infected for herd immunity to be achieved, clearly leading to many deaths and so this was understandably met with widespread dismay. Following this, Matt Hancock MP, Secretary of State for Health and Social Care speaking to Andrew Marr, stressed that this is not part of the Government's plan to tackle CV. But it still throws up questions and one has to ask if the public actually understand what herd immunity is and if it could realistically be a viable option in tackling the current CV pandemic?

What is herd immunity?

Herd immunity describes a situation where a sufficient proportion of the population has immunity to a given infection such that it slows or prevents disease spread, protecting "at-risk" individuals.

Immunity can be generated through natural infection, allowing the body to mount an immune response to an invading pathogen. However, in this case it means the individual must go through disease to acquire this immunological

protection for the future. Alternatively, vaccination can be used which introduces the body to a form of the pathogen that will not cause the disease in the individual but still enables them to generate a protective response in a controlled manor.

Effective herd immunity is typically achieved through vaccination, therefore not only protecting the vaccinated individuals themselves from becoming ill but creating a situation of minimal disease spread whereby anyone who cannot be vaccinated or fails to develop effective immunity after vaccination is protected. At-risk individuals may include those with underling medical conditions or the elderly where immune function may be impaired. For some diseases, children are also classed as at-risk, but this depends on the specific disease being considered.

Prof Rowland Kao, Sir Timothy O'Shea Professor of Veterinary Epidemiology and Data Science, University of Edinburgh, said "Herd immunity is a potentially confusing term because it really has nothing directly to do with the immune system. When everyone in a group (i.e. a "herd") is susceptible to a disease, and able to transmit it once infected, this means that once anyone in the group becomes infected, then everyone else is at risk. And so, the disease has a good chance to propagate. However, if some of the group are protected, for example by vaccination, then this means that at least some of the time, a contact that would have been infectious, isn't infectious, because the contact was with someone who couldn't get infected. Because the number of contacts over the lifetime of an infection is limited, this therefore means that the disease's ability to reproduce is impaired.

If there are enough individuals protected so that, on average, the disease when introduced can infect less than one other, this means that the disease will infect maybe a few, but will not spread broadly through the population. The important point is that not everyone needs to be protected in order for the group as a whole to have little chance of getting infected. The concept is therefore called "herd immunity" because it means that, at the group or herd level, there will be relatively few infections in the group, even if there is at least one infection introduced.

Herd immunity from vaccination or natural infection

Vaccination is not the only way to generate immunity within a population. People who become infected naturally and reC 19er are likely to develop lasting immunity which could have the same effect as vaccinating the population. There are however a number of points that need to be considered here.

Dose – When administering a vaccine, a controlled amount of the antigen(s) is administered, but in natural infection the dose is likely to be unknown. This may mean someone receives a high level of exposure and may therefore be prone to more severe disease or complications. Alternatively, if the dose is incredibly low, this may impair the effectiveness of a future immune response were they to be exposed to the same pathogen again.

Duration of immunity – Typically, during the development phases of a vaccine, antibody levels will be monitored over time and the duration for which immunity lasts tested. This type of information enables vaccine companies to determine what doses are appropriate and how frequently an individual may require booster vaccinations to maintain protection. With natural infection however, determining the duration of immunity may be difficult and vary depending on other variables such as dose.

How does immunity affect the spread of a virus?

The spread of a virus can be slowed and even halted by the presence of immunity within a population. This immunity can be acquired or artificially induced using vaccines. In this graphic, we look at two populations, one without any immunity and one with immunity, to see how the spread changes.

Population 1: No Immunity

In the image above we see the progress of a virus (in red) though an uninfected population (in black) without any immunity.

The basic reproduction number (R0) is the average number of infections that would arise from a single case being introduced to an entirely susceptible population. In phase 1, the virus, which has an R0 of 3 (meaning every infected

person goes on to infect an average of three other people), spreads from an infected single person to three uninfected people with no immunity. In phase 2, those three people now infect three more people each, leading to an increased infected population, seen in phase 3.

Population 2: Immunity Present

In this second image, we see how immunity in the population (immune people are in green) can stop the spread of a virus.

In an immunized population, researchers use a different metric, the effective reproduction rate (R) to measure the spread of the disease. In phase 1 this time, the same virus attempts to pass from a single infected person to three others but can only infect one (phase 2). As only one person is being infected on average, the R is reduced to one.

If R can be pushed below 1, the virus will gradually die out in the population as more people reC 19er than are infected.

This example is for a fictional virus, but measures like R0 and R can be used to assess all infectious diseases that spread through a population. SARS-C 19-2's R0 is estimated at 2.5. There is no known community immunity to C 19.

Can herd immunity protect us?

A herd immunity approach can be amazingly effective in keeping disease cases down in a population. Take measles for example. It was shown that 93-95% of the population need to be immune to measles to effectively protect the remaining population who are not, be that because they cannot be vaccinated, are immunocompromised or did not mount a protective immune response. In recent years we have seen what that breakdown in herd immunity has done. With falling vaccine uptake, cases soared in the many countries who had not had a measles problem for many years. In some cases, this led to mandatory vaccinations to rectify the situation.

Whilst herd immunity can be effective, it cannot be applied to all infectious diseases. Those in which it can be effective are typically restricted to

a single host species within which transmission occurs by relatively direct contact, and infection/immunization induces solid immunity.

Other factors to consider include:

Rate of mutation – With a pathogen that has a very slow rate of mutation, someone with prior immunity through infection or immunization who is then exposed to the pathogen again has a good chance of being protected by their previous exposure or vaccination – the solid immunity mentioned above. For pathogens with higher mutation rates however, such as rhinovirus which causes the common cold, just because you may be protected against one form, may not mean that the new form encountered is sufficiently similar to offer cross protection.

Different pathogen, different dynamics – Factors such as infectivity of a pathogen are important when considering what proportion of the population need to be immune for herd immunity to be effective. For a disease that does not transmit between people easily, fewer people will need to be immune for spread to halt, making heard immunity more achievable. The more contagious the disease however, the higher the percentage of people that will need to be immune for herd immunity to be achieved.

What about CV, is herd immunity an option to protect the vulnerable?

"Protection comes about because in a partially immune population infected individuals are less likely to encounter uninfected ones and so transmit the virus to them. Consequently, infection chains are interrupted, and spread is stopped or slowed. The proportion of the population that needs to be immune for the number of new cases to decline depends on the basic reproductive ratio of the virus, known as R0. This is the average number of secondary cases that arise from each primary case when a virus is spreading in a wholly susceptible population" commented Dr Simon Gubbins from The Pirbright Institute.

He continued "For SARS-C 19-2 estimates for R0 are around 2.5, so the proportion of the population that needs to be immune to achieve herd immunity is around 60%." However, the CV, SARS-C 19-2, at the center of this current pandemic is novel, which means there is consequently a lack of any

pre-existing immunity leaving the whole population susceptible to infection. This is compounded by the absence of an effective vaccine and unknown duration for which immunity may last.

Whilst models for diseases like measles are based on many years of data regarding immunological and disease dynamics and pathogen mutation rate, this is still very much an unknown for SARS-C 19-2, meaning even if you were to achieve what is believed to be the percentage infection required for herd immunity, there is no guarantee this will protect at-risk groups in the future.

"Herd immunity acts as an evolutionary pressure for a virus to adapt so that it can escape immunity and can spread more easily. Influenza viruses are exceptionally good at this and frequently mutate to produce new strains to which people are not immune. This is the reason the seasonal flu vaccine needs to be updated annually. There is no information to show whether something similar will happen with SARS-C 19-2" concluded Dr Gubbins.

Considering current strategies being employed to slow the spread of disease, Dr Thomas House, Reader in Mathematical Statistics, University of Manchester commented "Social distancing measures do not lead to herd immunity, so when they are lifted the epidemic may grow again. Whether we aim for it or not, herd immunity will happen at some point in the future since neither a growing epidemic nor social distancing measures can continue forever, and the aim of policy should be for this to happen with the minimum human cost possible."

--https://www.technologynetworks.com/immunology/articles/is-a-herd-immunity-approach-to-the-CV-outbreak-a-viable-option-332199

Vaccination Destroys Natural Herd Immunity and Weakens the Population

I want to talk about the heard immunity briefly because it is an especially important concept and something upon which vaccine mandates are largely dependent.

The perceived need to maintain a level of immunity in the population using vaccination to prevent exposure of those who, for example cannot be vaccinated. They are too young, or they have got some immune compromised due to cancer chemotherapy or steroids or something like this.

And it is a particularly important thing to understand and to be able to articulate in a way that one can debate with those who maintain that herd immunity is sort of central tenet there of why we should mandate vaccines for children.

What I want to do is separate it out into natural herd immunity that occurred before the vaccine era and then herd immunity or the perception of herd immunity in the vaccine era.

Now firstly, natural herd immunity did not act to prevent infection. What it did was act to prevent infection in those at highest risk of complications.

For example, the incredibly young, and how, and just go into how vaccination has changed that. Let us use measles s as an example. We will look several viruses but let us use measles.

Firstly, herd immunity, natural herd immunity, protection against serious morbidity and mortality, death from infection, was declining dramatically from measles long before the vaccine ever came in. So, herd immunity was changing over time, it was improving. To the extent that beyond 1920 in the UK and the

US, there was a dramatic fall in case fatality rate in the death from infection by 99,6 % before the vaccine ever came in.

Now the question would be is what would have happened if we'd never vaccinated?

If you had followed the natural trend of that curve, it was approaching zero.

Would it have gone to zero in the absence of vaccination?

And the answer is likely yes. That was that natural trend.

Of course, we will never know because we intervened with vaccination.

The question is why?

Why was case fatality rate and morbidity the seriousness of the infection itself and its complications falling so dramatically?

And this is down to pattern of exposure, these are socioeconomic circumstances. So, one of the serious, one of the risks of serious adverse outcome from measles is the intensity of the exposure, the amount of virus that you get. And as family sizes decreased slum dwellings decreased, children sharing beds and bedrooms declined, the intensity of exposure dropped. And over time not only did the intensity of the exposure drop but nutritional status improved.

So, vitamins such as “C”, “D”, and “A” improved and helped immune defenses. So, what we were seeing was a decline, a natural decline, in the seriousness of the infection long in advance of vaccines coming in.

And that was an example of natural herd immunity.

It was operating to protect babies.

And the other part of natural herd immunity was maternal immunity, passive immunity from the mother.

The mother exposed to measles herself as a child develops lifelong immunity and then when she's pregnant she gives antibodies transplacentally and in breast milk postpartum to her baby that protect him or her through the first year of life.

That is natural herd immunity, an example of it.

Because the baby is at greatest risk of an adverse reaction to measles in the first year of life intuitively because their immune system is not adequately developed.

At least in part.

So that natural herd immunity from the mother protected the infant during that susceptible period.

Now, what has happened in the face of vaccination, is that natural herd immunity has been destroyed. What we now have are mothers being vaccinated as children, not contracting natural measles, giving extremely poor passive immunity to their babies and that baby, then being susceptible to measles in the first year of life.

So, we have destroyed that part of natural herd immunity as an unintended and unexpected consequence of vaccination.

Now, you could argue that if measles were to come back, precisely because of the effects of vaccination, we would have a lot of babies who were susceptible to measles and problems with that infection.

This is a problem that can be ascribed to the vaccine program itself.

Another example is mumps, let us take mumps. The mumps vaccine does not work.

So, what we're seeing is outbreaks of mumps around the world in populations have received two, three, four doses of the mumps vaccine.

The mumps vaccine does not work, and why it doesn't work is another issue that we can go into and how * *Merck acted to C 19er that up is an issue of current interest. **

But we do not need to go into that for the moment.

Mumps was historically contracted at around the age of five to seven by children who then developed lifelong immunity. Mumps in children is a trivial disease.

It is acknowledged to be a trivial disease and indeed the CDC and the Department of Health in the UK determined there was no need for a mumps vaccine because it was so mild, and its complications were not serious.

But nonetheless, for commercial reasons I believe, a mumps vaccine was foisted onto the population and has been made mandatory for many.

Now, because the vaccine does not work in enough people or for long enough, then what we see is the reemergence of mumps in older populations, in teenagers and college students. And the problems arise because mumps is a much more serious disease in, for example, post-pubertal males, where they can develop testicular inflammation, orchitis and sterility.

So a mumps vaccine that doesn't work is not only a useless vaccine, it's a dangerous vaccine because it destroys natural herd immunity, that is the exposure of individuals when the disease is mild, and displaces it up to a susceptibility to disease at a time when the disease is severe or more severe.

So not only have we destroyed natural herd immunity to mumps with vaccination, we have made mumps a much more dangerous disease than it was historically.

The other example, looking at live viral vaccines, is chicken pox.

There was a disease, a rite of passage, a trivial disease for so, so many children,

where it was decided that, initially to keep mother in the word place, ergo for economic reasons, that there should be a chicken pox vaccine, that wasn't incredibly good propaganda.

So, it became more serious than we thought. Suddenly it changed. The sort of the messaging around the chicken pox vaccine.

But what happened with chicken pox is a DNA virus that is able to persist in the body and come back as shingles. A very severe and unpleasant condition. Now typically seen in those who are immuno-compromised or elderly patients?

Shingles was extremely rare in children and those who were otherwise healthy. Now what happened was is the immune system was regularly boosted against chicken pox by exposure to children and grandchildren who had natural chicken pox. So not only had you contracted it as a child, but then you had this intimate and wild type boosting, it's called, due to exposure to your children and grandchildren. And that kept the immune system boosted and the virus under control.

And what happened when vaccination came in is that natural pattern of chicken pox epidemics disappeared, the immune system was no longer boosted, the immunity to chickenpox waned in individuals and the virus woke up again and it causes shingles. So, we now face an epidemic of shingles.

Not just in people who are immunocompromised, or the elderly, but across all age spectra and that is very, very disturbing. Because it's a very, very unpleasant condition. And that again, is an unintended consequence of vaccination, which is operated to destroy natural herd immunity.

And the response of that is to, by the companies, by the manufacturers, is,

"Wow, we've created another market. "We've created another epidemic "so let us make a vaccine against it."

So, they took the chicken pox vaccine, multiplied it 10 times the dose and turned it into what was called ZOSTAVAX or shingles vaccine.

And so, they will look at every cloud as having a silver lining, clouds which they themselves have created. But there you have just three examples of how natural herd immunity operated in the pre-vaccine era and has been destroyed by the process of vaccination.

And finally, as just a sort of side not, we are told that you require 95% immunity within a population conferred by the vaccine to protect against the resurgence of an infection like measles.

That must be nonsense because they are talking about children.

But we know these vaccines wane over time and so, perhaps, 96% of the population are not immune to these infections.

What about all the adults who are not immune to these infections because they had their vaccines years ago, they have never had boosters and now their immunity has gone away?

So, this whole concept of herd immunity, which relies upon the children, 95% of the children being vaccinated does not take account of the many, many millions of adults who are no longer immune.

Who are, nonetheless by their criteria, capable of contracting and transmitting these infectious diseases. Does it happen? No. So, the very foundation of mandatory vaccine laws, in other words the need to protect the unprotected by virtue of a mass vaccination uptake, is so deeply flawed, so deeply flawed on many reasons.

But the anxiety for me, as much as anything, is that we have destroyed natural herd immunity. And have we created populations that are now in some way dependent upon these flawed, deeply flawed, vaccines and vaccine policies?

And what happens now when a virus escapes the immunity conferred by the vaccine or a bacteria, such as pertussis, which we're seeing.

So now pertussis has escaped in many the immunity conferred by the pertussis vaccine. Nature abhors a vacuum and so you create these mutants that then become the dominant strain for which we have no immunity.

What happens when the superbug comes along as it has done with antibiotics and bacteria and we no longer have an answer for it?

So we are creating, I believe, an invidious position for future generations in dealing with infectious disease by virtue of not having thought through this issue very, very carefully and learned from our experience with antibiotics before embarking on what is a very hazardous vaccine program I believe.

https://steemit.com/health/@vox00/vaccination-destroys-natural-herd-immunity-and-weakens-the-population

C 19 Incubation Period, Asymptomatic or Pre-Symptomatic Transmission, Reinfection, and Attack Rate

What Is the Incubation Period?

The incubation period is the duration between exposure to the virus and the onset of symptoms. The World Health Organization (WHO) currently estimates that the incubation period ranges from 1 to 14 days, with a median incubation period of 5 to 6 days. These estimates will be refined as more data becomes available. The Department is aware of reports that suggest there have been cases with longer incubation periods, such as 24 days.

The incubation period of infections often has a skewed distribution, where most patients have an incubation period that clusters around the average, but a few patients have a longer incubation period. Medical experts believe reports of cases with longer incubation periods are statistical outliers – while longer incubation periods are possible, they may have been reported in

error, or had exposure to an unidentified case at a later date that has not been identified in a transmission chain.

Is there asymptomatic or pre-symptomatic transmission?

To date, the exact nature of transmission of SARS-C 19-2 is not well understood. Epidemiological data suggests that the majority of transmission occurs from symptomatic cases. However, there have been documented cases of asymptomatic and pre-symptomatic transmission in a small.

Can Reinfection Occur?

There have been reports of apparent re-infection in a small number of cases. However, most of these describe patients having tested positive within 7-14 days after apparent reC 19ery. Immunological studies indicate that patients reC 19ering from C 19 mount a strong antibody response. It is likely that positive tests soon after reC 19ery represent persisting excretion of viral Novel CV (C 19) 2 RNA, and it should be noted that PCR tests cannot distinguish between "live" virus and noninfective RNA. Australian guidelines currently require patients who have had C 19 to test negative on two tests 24 hours apart before being released from isolation.

What is the case fatality rate and overall severity of the disease?

A large study conducted in China on 44,672 confirmed cases has informed much of what we currently know with regards to case fatality and overall severity of the disease. However, at the moment there is not enough data on cases outside mainland China to make a meaningful comparison. In China, the case fatality rate (CFR) is reported to be 2.3%, however this is much higher in Hubei Province (2.9%) than in all other provinces (0.4%).

The CFR is likely to be much lower than reported, due to a proportion of mild cases going underreported in the community. CFR estimates for regions outside mainland China are generally low; however, the clinical outcomes for the majority of these cases is still unknown. Based on current estimates, it is estimated that approximately 1% of C 19 patients will die. We

will be able to better estimate this proportion once serological studies are performed. Likewise, we continue to gather information on the overall severity of the disease.

Based on current data, it is estimated that approximately 80% of cases will have a mild illness, approximately 20% will require hospitalization, and approximately 3-5% will require ICU admission. Cases classified as critical (respiratory failure, septic shock, and/or multi-organ failure) have a CFR of approximately 50%. Patients in this circumstance have tended to be elderly with comorbidities.

How Infectious is This Pathogen?

There are a number of ways that this can be measured. The reproductive rate of the virus, or R0, measures the average number of secondary infections caused by a single case. The R0 is a context specific measurement. While the R0 in mainland China is estimated to be 2.58, it is likely that public health measures imposed by China have led to a relatively low R0. The R0 may be higher in countries which do not implement strong public health measures, such as the case isolation and contact quarantine measures used in Australia. There has been a large variation in R0 calculated by different studies.

Attack Rate

In epidemiology, the attack rate is the percentage of the population that contracts the disease in an at-risk population during a specified time interval. It is used in hypothetical predictions and during actual outbreaks of disease.

The WHO initially estimated the R0 to be 1.4-2.5 (average 1.95), however a recent review of 12 studies estimated the basic R0 to be 3.28 and the median R0 to be 2.79. Another measure of infectiousness is household secondary attack rate, or the proportion of household members who are likely to get infected from a case. Estimates of this rate have varied significantly between studies, ranging from as low as 3-10% to as high as 100%.

This suggests that there may be factors that vary considerably between different groups, such as types of activities, duration of event, ventilation of the

household and viral shedding of the case. The Department has released guidance on home isolation which outlines steps household members should take if there is a suspected or confirmed case in the house.

--https://www.health.gov.au/sites/default/files/documents/2020/03/CV-C 19-information-for-clinicians.pdf

The WHO "Immunity Passports" in the Context of C 19

WHO has published guidance on adjusting public health and social measures for the next phase of the C 19 response.1 Some governments have suggested that the detection of antibodies to the SARS-C 19-2, the virus that causes C 19, could serve as the basis for an “immunity passport” or “risk-free certificate” that would enable individuals to travel or to return to work assuming that they are protected against re-infection. There is currently no evidence that people who have reC 19ered from C 19 and have antibodies are protected from a second infection.

The measurement of antibodies specific to C 19

The development of immunity to a pathogen through natural infection is a multi-step process that typically takes place over 1-2 weeks. The body responds to a viral infection immediately with a non-specific innate response in which macrophages, neutrophils, and dendritic cells slow the progress of virus and may even prevent it from causing symptoms. This non-specific response is followed by an adaptive response where the body makes antibodies that specifically bind to the virus. These antibodies are proteins called immunoglobulins. The body also makes T-cells that recognize and eliminate other cells infected with the virus. This is called cellular immunity. This combined adaptive response may clear the virus from the body, and if the response is strong enough, may prevent progression to severe illness or re-infection by the same virus. This process is often measured by the presence of antibodies in blood.

WHO continues to review the evidence on antibody responses to SARS-C 19-2 infection.2-17 Most of these studies show that people who have reC 19ered from infection have antibodies to the virus. However, some of these people have exceptionally low levels of neutralizing antibodies in their blood,4 suggesting that cellular immunity may also be critical for reC 19ery. As of 24 April 2020, no study has evaluated whether the presence of antibodies to SARS-C 19-2 confers immunity to subsequent infection by this virus in humans.

Laboratory tests that detect antibodies to SARS-C 19-2 in people, including rapid immunodiagnostic tests, need further validation to determine their accuracy and reliability. Inaccurate immunodiagnostic tests may falsely categorize people in two ways. The first is that they may falsely label people who have been infected as negative, and the second is that people who have not been infected are falsely labelled as positive. Both errors have serious consequences and will affect control efforts. These tests also need to accurately distinguish between past infections from SARS-C 19-2 and those caused by the known set of six human CVes. Four of these viruses cause the common cold and circulate widely. The remaining two are the viruses that cause Middle East Respiratory Syndrome and Severe Acute Respiratory Syndrome. People infected by any one of these viruses may produce antibodies that cross-react with antibodies produced in response to infection with SARS-C 19-2.

Many countries are now testing for SARS-C 19-2 antibodies at the population level or in specific groups, such as health workers, close contacts of known cases, or within households.21 WHO supports these studies, as they are critical for understanding the extent of – and risk factors associated with – infection. These studies will provide data on the percentage of people with detectable C 19 antibodies, but most are not designed to determine whether those people are immune to secondary infections.

Other Considerations

At this point in the pandemic, there is not enough evidence about the effectiveness of antibody-mediated immunity to guarantee the accuracy of an "immunity passport" or "risk-free certificate." People who assume that they are

immune to a second infection because they have received a positive test result may ignore public health advice. The use of such certificates may therefore increase the risks of continued transmission. As new evidence becomes available, WHO will update this scientific brief.

References

1) Considerations in adjusting public health and social measures in the context of C 19. https://www.who.int/emergencies/diseases/novel-CV-2019/technical-guidance/critical-preparedness-readiness-and-response-actions-for-C 19
2) Wölfel R, Corman VM, Guggemos W, et al. Virological assessment of hospitalized patients with C 19ID-2019. Nature 2020.
3) To KK, Tsang OT, Leung WS, et al. Temporal profiles of viral load in posterior oropharyngeal saliva samples and serum antibody responses during infection by SARS-C 19-2: an observational cohort study. Lancet Infect Dis. 2020 Mar 23. pii: S1473-3099(20)30196-1. doi: 10.1016/S1473-3099(20)30196-1.

https://www.who.int/emergencies/diseases/novel-CV-2019/technical-guidance/early-investigations

Immunity Certificates (Passports): A Load Of Nonsense and C 19ert Psyop

***How many Chinese scientists are in the WHO references in the previous article? Should this concern us? Are we supposed to trust the WHO when it is led and headed by the very same Chinese government that has America in its economic crosshairs, as well a country that has been accused of crimes against humanity a football field long?

China:

"Your papers, please. You have none? You must go back to house, now!"

Once again, in this article, I step into the world of official gibberish about the epidemic and the virus and tests and so on. I point out the internal contradictions in the government position. And then I step back and look at what they're really up to, in the way of a C 19ert operation.

Let us start with the official word on so-called immunity certificates.

POLITICIO 4/10:

"Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases, revealed Friday the federal government is considering issuing Americans certificates of immunity from the CV, as the Trump administration works to better identify those who have been infected and restart the U.S. economy in the coming weeks."

"The proposal is contingent upon the widespread deployment of antibody tests which the National Institutes of Health and the Food and Drug Administration are in the process of validating in the U.S., Fauci said."

"Although CV testing thus far has been able to determine if an individual has an active infection, antibody tests report whether an asymptomatic person was previously infected but has since reC 19ered [and is immune], potentially allowing them to return to their jobs."

Now let us take that POLITICO article apart.

Immunity certificates would be issued to people who test POSITIVE on an antibody test. Meaning: antibodies in a person's body are a sign that he has gained immunity from the CV.

But wait. How about this?

Science News, March 27: "Science News spoke with...Charles Cairns, dean of the Drexel University College of Medicine, about how antibody tests work and what are some of the challenges of developing the tests."

"Cairns: 'The big question is: Does a positive response for the antibodies mean that person is actively infected, or that they have been infected in the past [and are now immune] ...?'"

What??

In other words, when you penetrate an inch below the surface, you find there are even official/mainstream doubts, grave doubts about the meaning of a positive antibody test. It could mean IMMUNE or it could mean INFECTED.

This would be like saying, "The photo either proves there was a sixteen-car wreck on Highway 5, or it was smooth sailing and there was no accident at all."

Actually, since 1984, a positive antibody test has generally been taken to mean the person is infected, has the disease in question.

So why the sudden turnaround now? Why are Fauci and other government officials claiming that a positive antibody test signals immunity?

Answer: Because, with the widespread use of this simple and quick antibody test (much quicker and easier to perform than the current PCR test), a reason is invented for issuing immunity certificates. And this is what the goal is. Introduce the population to immunity certificates. As a tune-up for the underlying operation, which is:

Immunity certificates for people who eventually receive vaccinations against C 19 (and, finally, all vaccines).

Just take the C 19 vaccine and you'll be immune, and you can carry with you a certificate, wherever you go---and you WILL be allowed to go here and there and live a normal life. With your paper or digital or tattoo immunity certificate.

Whether the certificate plan will be enacted this time around (C 19), or in the next fake pandemic, remains to be seen. But the IDEA is now firmly planted in the public mind. You can win a "gold star" on the blackboard from the teacher---your certificate to a better life. Just obey and follow orders. TAKE THE VACCINE.

Carrot and stick. Be free or be limited.

If, indeed, we see a C 19 vaccine introduced, another variation on this operation would be: "Under Emergency regulations, everyone must take the shot." But when you do, you will get your unbelievably valuable certificate of immunity. You'll win a prize. Isn't that wonderful?

No. It isn't.

It is all about CONTROL.

And in this article, I haven't discussed questions about what would actually be IN the C 19 vaccine. I took up that subject in a recent piece about DNA vaccines. The new DNA technology, if introduced, would PERMANENTLY alter the genetic makeup of the vaccine-recipient.

And meanwhile...don't you just love the idea of the government first locking you up, and then "freeing" you with an official seal of approval?

"The gate is open for you, sir. You have your papers. But you, sir, you must go back. No papers."

--Jon Rappoport

Quantum Dot Tattoo Vaccination Certification Mark of the Beast

MIT News:

MIT engineers have developed a way to store medical information under the skin, using a quantum dot dye that is delivered, along with a vaccine, by a microneedle patch. The dye, which is invisible to the naked eye, can be read later using a specially adapted smartphone, storing medical information below the skin's surface. Specialized dye, delivered along with a vaccine, could enable "on-patient" storage of vaccination history.

Every year, a lack of vaccination leads to about 1.5 million preventable deaths, primarily in developing nations. One factor that makes vaccination campaigns in those nations more difficult is that there is little infrastructure for

storing medical records, so there's often no easy way to determine who needs a particular vaccine.

MIT researchers have now developed a novel way to record a patient's vaccination history: storing the data in a pattern of dye, invisible to the naked eye, that is delivered under the skin at the same time as the vaccine.

"In areas where paper vaccination cards are often lost or do not exist at all, and electronic databases are unheard of, this technology could enable the rapid and anonymous detection of patient vaccination history to ensure that every child is vaccinated," says Kevin McHugh, a former MIT postdoc who is now an assistant professor of bioengineering at Rice University.

The researchers showed that their new dye, which consists of nanocrystals called quantum dots, can remain for at least five years under the skin, where it emits near-infrared light that can be detected by a specially equipped smartphone.

McHugh and former visiting scientist Lihong Jing are the lead authors of the study, which appears today in Science Translational Medicine. Ana Jaklenec, a research scientist at MIT's Koch Institute for Integrative Cancer Research, and Robert Langer, the David H. Koch Institute Professor at MIT, are the senior authors of the paper.

An Invisible Record

Several years ago, the MIT team set out to devise a method for recording vaccination information in a way that doesn't require a centralized database or other infrastructure. Many vaccines, such as the vaccine for measles, mumps, and rubella (MMR), require multiple doses spaced out at certain intervals; without accurate records, children may not receive all of the necessary doses.

"In order to be protected against most pathogens, one needs multiple vaccinations," Jaklenec says. "In some areas in the developing world, it can be very challenging to do this, as there is a lack of data about who has been vaccinated and whether they need additional shots or not."

To create an "on-patient," decentralized medical record, the researchers developed a new type of copper-based quantum dots, which emit light in the near-infrared spectrum. The dots are only about 4 nanometers in diameter, but they are encapsulated in biocompatible microparticles that form spheres about 20 microns in diameter. This encapsulation allows the dye to remain in place, under the skin, after being injected.

The researchers designed their dye to be delivered by a microneedle patch rather than a traditional syringe and needle. Such patches are now being developed to deliver vaccines for measles, rubella, and other diseases, and the researchers showed that their dye could be easily incorporated into these patches.

The microneedles used in this study are made from a mixture of dissolvable sugar and a polymer called PVA, as well as the quantum-dot dye and the vaccine. When the patch is applied to the skin, the microneedles, which are 1.5 millimeters long, partially dissolve, releasing their payload within about two minutes.

By selectively loading microparticles into microneedles, the patches deliver a pattern in the skin that is invisible to the naked eye but can be scanned with a smartphone that has the infrared filter removed. The patch can be customized to imprint different patterns that correspond to the type of vaccine delivered.

"It's possible someday that this 'invisible' approach could create new possibilities for data storage, biosensing, and vaccine applications that could improve how medical care is provided, particularly in the developing world," Langer says.

Effective Immunization

Tests using human cadaver skin showed that the quantum-dot patterns could be detected by smartphone cameras after up to five years of simulated sun exposure.

The researchers also tested this vaccination strategy in rats, using microneedle patches that delivered the quantum dots along with a polio vaccine. They found that those rats generated an immune response similar to the response of rats that received a traditional injected polio vaccine.

"This study confirmed that incorporating the vaccine with the dye in the microneedle patches did not affect the efficacy of the vaccine or our ability to detect the dye," Jaklenec says.

The researchers now plan to survey health care workers in developing nations in Africa to get input on the best way to implement this type of vaccination record keeping. They are also working on expanding the amount of data that can be encoded in a single pattern, allowing them to include information such as the date of vaccine administration and the lot number of the vaccine batch.

The researchers believe the quantum dots are safe to use in this way because they are encapsulated in a biocompatible polymer, but they plan to do further safety studies before testing them in patients.

"Storage, access, and control of medical records is an important topic with many possible approaches," says Mark Prausnitz, chair of chemical and biomolecular engineering at Georgia Tech, who was not involved in the research. "This study presents a novel approach where the medical record is stored and controlled by the patient within the patient's skin in a minimally invasive and elegant way."

The research was funded by the Bill and Melinda Gates Foundation and the Koch Institute Support (core) Grant from the National Cancer Institute. Other authors of the paper include Sean Severt, Mache Cruz, Morteza Sarmadi, Hapuarachchige Surangi Jayawardena, Collin Perkinson, Fridrik Larusson, Sviatlana Rose, Stephanie Tomasic, Tyler Graf, Stephany Tzeng, James Sugarman, Daniel Vlasic, Matthew Peters, Nels Peterson, Lowell Wood, Wen Tang, Jihyeon Yeom, Joe Collins, Philip Welkhoff, Ari Karchin, Megan Tse, Mingyuan Gao, and Moungi Bawendi.

-- http://news.mit.edu/2019/storing-vaccine-history-skin-1218

Quantum-Dot Tattoos Hold Vaccination Record Commissioned by The Bill and Melinda Gates Foundation

Dr. Kevin McHugh of the Rice Department of Bioengineering:

Keeping track of a child's shots could be so much easier with technology invented by a new Rice University professor and his colleagues.

Kevin McHugh, an assistant professor of bioengineering at Rice since this summer, and a team at his previous institution, the Massachusetts Institute of Technology, report in a C 19er story in Science Translational Medicine on their development of quantum-dot tags that fluoresce with information after they're injected as part of a vaccination.

A pattern of 1.5-millimeter microneedles that contain vaccine and fluorescent quantum dots are applied as a patch. The needles dissolve under the skin, leaving the encapsulated quantum dots. Their pattern can be read to identify the vaccine that was administered. The project was co-led by Rice University bioengineer Kevin McHugh during his time at MIT. (Credit: Second Bay Studios)

A pattern of 1.5-millimeter microneedles that contain vaccine and fluorescent quantum dots are applied as a patch. The needles dissolve under the skin, leaving the encapsulated quantum dots. Their pattern can be read to identify the vaccine that was administered. The project was co-led by Rice University bioengineer Kevin McHugh during his time at MIT. (Credit: Second Bay Studios)

The tags are incorporated in only some of the array of sugar-based microneedles on a patch. When the needles dissolve in about two minutes, they deliver the vaccine and leave the pattern of tags just under the skin, where they become something like a bar-code tattoo

Instead of ink, this highly specific medical record consists of copper-based quantum dots embedded in biocompatible, micron-scale capsules. Their near-infrared dye is invisible, but the pattern they set can be read and interpreted by a customized smartphone.

The two-year project is aimed at the 1.5 million preventable deaths that result from a lack of vaccinations, primarily in developing nations.

"The Bill and Melinda Gates Foundation came to us and said, 'Hey, we have a real problem — knowing who's vaccinated,'" said McHugh, who was recruited to join Rice with funding from the Cancer Prevention and Research Institute of Texas. "They said, 'We go on vaccination campaigns where people get into Hummers, drive to a rural village, set up a tent and start immunizing people, but they don't always know who's been immunized before and what vaccines are still needed."

Parents often don't know their children's vaccination histories, McHugh said. "So our idea was to put the record on the person," he said. "This way, later on, people can scan over the area to see what vaccines have been administered and give only the ones still needed.

"There are two sides to this," he said. "First, is that you don't administer unnecessary vaccines, which has a cost. But even bigger, you don't leave people under immunized and at risk of getting an infectious disease."

McHugh said the team worked with a bioethicist to be sure the patients' data remains protected. "She said we're on solid ethical ground as long as people can opt out, like getting the patch with only the vaccine. Also, the patch with quantum dots only contains information about the vaccine received. It doesn't tell you anything else about the person."

The square-centimeter patches hold up to 16 tiny needles. "They don't go very deep, which makes them theoretically painless and a lot easier for kids," McHugh said. "They're like putting on a bandage."

Because the 1.5-millimeter needles disintegrate in the skin, no biohazardous sharps remain for disposal, he said. Testing in model skin in

strong light showed the 4-nanometer dots should be readable for at least five years.

McHugh plans to continue his work on the technology at Rice. "There are so many aspects to this particular project that we need nanotechnologists, bacteriologists, chemists and computer scientists," he said. "So this is certainly something I'm thinking about for my lab here."

-- https://bioengineering.rice.edu/news/quantum-dot-tattoos-hold-vaccination-record

The Final Solution

The Final Solution in Germany was the extermination of The Jews. And, Bill Gates is on record declaring that his Vaccines are "The Final Solution ". Any more questions?

Big Pharma's Final Solution: The Pseudoscience of Vaccines

The Lethal History of Vaccines

Scientific propaganda about vaccines has reached dizzying heights, as officials point the uninformed public toward the Day of Liberation, when a C 19ID shot, otherwise known as God, will rescue Earth.

Here, from a chapter in my 1988 book, AIDS INC., is an excerpt exposing some of the infamous moments in vaccination history---hidden by the press, or simply forgotten.

For those denialists who cling to the notion that vaccines are remarkably safe and effective, this article is a pill you can swallow, bitter to be sure, but immunizing against the effects of bald lies from the bent medical establishment.

Understand: this is only a partial history of disasters and revelations, and it stops at 1988.

4) "The combined death rate from scarlet fever, diphtheria, whooping cough and measles among children up to fifteen shows that nearly 90 percent of the total decline in mortality between 1860 and 1965 had occurred before the introduction of antibiotics and widespread immunization. In part, this recession may be attributed to improved housing and to a decrease in the virulence of micro-organisms, but by far the most important factor was a higher host-resistance due to better nutrition." Ivan Illich, Medical Nemesis, Bantam Books, 1977
5) "In a recent British outbreak of whooping cough, for example, even fully immunized children contracted the disease in fairly large numbers; and the rates of serious complications and death were reduced only slightly. In another recent outbreak of pertussis, 46 of the 85 fully immunized children studied eventually contracted the disease."
6) "In 1977, 34 new cases of measles were reported on the campus of UCLA, in a population that was supposedly 91% immune, according to careful serological testing. Another 20 cases of measles were reported in the Pecos, New Mexico, area within a period of a few months in 1981, and 75% of them had been fully immunized, some of them quite recently. A survey of sixth-graders in a well-immunized urban community revealed that about 15% of this age group are still susceptible to rubella, a figure essentially identical with that of the pre-vaccine era."
7) "Finally, although the overall incidence of typical acute measles in the U.S. has dropped sharply from about 400,000 cases annually in the early 1960s to about 30,000 cases by 1974-76, the death rate

remained exactly the same; and, with the peak incidence now occurring in adolescents and young adults, the risk of pneumonia and demonstrable liver abnormalities has actually increased substantially, according to one recent study, to well over 3% and 2%, respectively." Richard Moskowitz, MD, The Case Against Immunizations, 1983, American Institute of Homeopathy.

8) "Of all reported whooping cough cases between 1979 and 1984 in children over 7 months of age - that is, old enough to have received the primary course of the DPT shots (diphtheria, pertussis, tetanus) - 41% occurred in children who had received three or more shots and 22% in children who had one or two immunizations."
9) "Among children under 7 months of age who had whooping cough, 34% had been immunized between one and three times..."
10) "... Based on the only U.S. findings on adverse DPT reactions, an FDA-financed study at the University of California, Los Angeles, one out of every 350 children will have a convulsion; one in 180 children will experience high-pitched screaming [can indicate brain damage]; and one in 66 will have a fever of 105 degrees or more." Jennifer Hyman, Democrat and Chronicle, Rochester, New York, special supplement on DPT, dated April 1987.
11) "A study undertaken in 1979 at the University of California, Los Angeles, under the sponsorship of the Food and Drug Administration, and which has been confirmed by other studies, indicates that in the U.S.A. approximately 1,000 infants die annually as a direct result of DPT vaccinations, and these are classified as SIDS (Sudden Infant Death Syndrome) deaths. These represent about 10 to 15% of the total number of SIDS deaths occurring annually in the U.S.A. (between 8,000 and 10,000 depending on which statistics are used)." Leon Chaitow, Vaccination and Immunization, CW Daniel Company Limited, Saffron Walden, Essex, England, 1987.

12) "Assistant Secretary of Health Edward Brandt, Jr., MD, testifying before the U.S. Senate Committee on Labor and Human Resources, rounded... figures off to 9,000 cases of convulsions, 9,000 cases of collapse, and 17,000 cases of high-pitched screaming for a total of 35,000 acute neurological reactions occurring within forty-eight hours of a DPT shot among America's children every year." DPT: A Shot in the Dark, by Harris L. Coulter and Barbara Loe Fischer, Harcourt Brace Jovanovich.
13) "While 70-80% of British children were immunized against pertussis in 1970-71, the rate is now 39%. The committee predicts that the next pertussis epidemic will probably turn out to be more severe than the one in 1974/75. However, they do not explain why, in 1970/71, there were more than 33,000 cases of pertussis with 41 fatal cases among the very well immunized British child population; whereas in 1974/75, with a declining rate of vaccination, a pertussis epidemic caused only 25,000 cases with 25 fatalities." Wolfgang Ehrengut, Lancet, Feb. 18, 1978, p. 370.
14) "... Barker and Pichichero, in a prospective study of 1232 children in Denver, Colorado, found after DTP that only 7% of those vaccinated were free from untoward reactions, which included pyrexia (53%), acute behavioral changes (82%), prolonged screaming (13%), and listlessness, anorexia and vomiting. 71% of those receiving second injections of DTP experienced two or more of the reactions monitored." Lancet, May 28, 1983, p. 1217
15) "Publications by the World Health Organization show that diphtheria is steadily declining in most European countries, including those in which there has been no immunization. The decline began long before vaccination was developed. There is certainly no guarantee that vaccination will protect a child against the disease; in fact, over 30,000 cases of diphtheria have been recorded in the United Kingdom in fully immunized children." Leon Chaitow, Vaccination and Immunization, p. 58.

16) "Pertussis (whooping cough) immunization is controversial, as the side effects have received a great deal of publicity. The counter claim is that the effectiveness and protection offered by the procedure far outweigh the possible ill effects... annual deaths, per million children, from this disease over the period from 1900 to the mid-nineteen seventies, shows that from a high point of just under 900 deaths per million children (under age 15) in 1905, the decline has been consistent and dramatic. There had been a lowering of mortality rates of approximately 80% by the time immunization was introduced on a mass scale, in the mid-nineteen fifties. The decline has continued, albeit at a slower rate, ever since. No credit can be given to vaccination for the major part of the decline since it was not in use." Chaitow, Vaccination and Immunization, p. 63.
17) "... the swine-flu vaccination program was one of its (CDC) greatest blunders. It all began in 1976 when CDC scientists saw that a virus involved in a flu attack outbreak at Fort Dix, N.J., was similar to the swine-flu virus that killed 500,000 Americans in 1918. Health officials immediately launched a 100-million-dollar program to immunize every American. But the expected epidemic never materialized, and the vaccine led to partial paralysis in 532 people. There were 32 deaths." U.S. News and World Report, Joseph Carey, October 14, 1985, p. 70, "How Medical Sleuths Track Killer Diseases."
18) "Despite (cases) in which (smallpox) vaccination plainly failed to protect the population, and despite the rampant side-effects of the methods, the proponents of vaccination continued their attempts to justify the methods by claims that the disease had declined in Europe as a whole during the period of its compulsory use. If the decline could be correlated with the use of the vaccination, then all else could be set aside, and the advantage between its current low incidence could be shown to outweigh the periodic failures of the method, and to favor the continued use of vaccination.

However, the credit for the decline in the incidence of smallpox could not be given to vaccination. The fact is that its incidence declined in all parts of Europe, whether or not vaccination was employed." Chaitow, Vaccination and Immunization, pp. 6-7.

19) "Smallpox, like typhus, has been dying out (in England) since 1780. Vaccination in this country has largely fallen into disuse since people began to realize how its value was discredited by the great smallpox epidemic of 1871-2 (which occurred after extensive vaccination)." W. Scott Webb, A Century of Vaccination, Swan Sonnenschein, 1898.

20) "In this incident (Kyoto, Japan, 1948) - the most serious of its kind - a toxic batch of alum-precipitated toxoid (APT) was responsible for illness in over 600 infants and for no fewer than 68 deaths."

21) "On 20 and 22 October 1948, a large number of babies and children in the city of Kyoto received their first injection of APT. On the 4th and 5th of November, 15,561 babies and children aged some months to 13 years received their second dose. One to two days later, 606 of those who had been injected fell ill. Of these, 9 died of acute diphtheritic paralysis in seven to fourteen days, and 59 of late paralysis mainly in four to seven weeks." Sir Graham Wilson, Hazards of Immunization, Athone Press, University of London, 1967.

22) "Accidents may, however, follow the use of this so-called killed (rabies) vaccine owing to inadequate processing. A very serious occurrence of this sort occurred at Fortaleza, Ceara, Brazil, in 1960. No fewer than 18 out of 66 persons vaccinated with Fermi's carbolized (rabies) vaccine suffered from encephalomyelitis and every one of the eighteen died." Sir Graham Wilson, Hazards of Immunization.

23) "At a press conference in Washington on 24 July, 1942, the Secretary of War reported that 28,585 cases of jaundice had been observed in the (American) Army between 1 January and 4 July

after yellow fever vaccination, and of these 62 proved fatal." Wilson, Hazards of Immunization.

24) "The world's biggest trial (conducted in south India) to assess the value of BCG tuberculosis vaccine has made the startling revelation that the vaccine 'does not give any protection against bacillary forms of tuberculosis.' The study said to be 'most exhaustive and meticulous,' was launched in 1968 by the Indian Council of Medical Research (ICMR) with assistance from the World Health Organization (WHO) and the U.S. Centers for Disease Control in Atlanta, Georgia."
25) "The incidence of new cases among the BCG vaccinated group was slightly (but statistically insignificantly) higher than in the control group, a finding that led to the conclusion that BCG's protective effect 'was zero.'" New Scientist, November 15, 1979, as quoted by Hans Ruesch in Naked Empress, Civis Publishers, Switzerland, 1982.
26) "Between 10 December 1929 and 30 April 1930, 251 of 412 infants born in Lubeck received three doses of BCG vaccine by the mouth during the first ten days of life. Of these 251, 72 died of tuberculosis, most of them in two to five months and all but one before the end of the first year. In addition, 135 suffered from clinical tuberculosis but eventually reC 19ered; and 44 became tuberculin-positive but remained well. None of the 161 unvaccinated infants born at the time was affected in this way and none of these died of tuberculosis within the following three years." Hazards of Immunization, Wilson.
27) "We conducted a randomized double-blind placebo-controlled trial to test the efficacy of the 14-valent pneumococcal capsular polysaccharide vaccine in 2295 high-risk patients... Seventy-one episodes of proved or probable pneumococcal pneumonia or bronchitis occurred among 63 of the patients (27 placebo recipients and 36 vaccine recipients)... We were unable to demonstrate any efficacy of the pneumococcal vaccine in

preventing pneumonia or bronchitis in this population." New England Journal of Medicine, November 20, 1986, p. 1318, Michael Simberkoff et al.

28) "But already before Salk developed his vaccine, polio had been constantly regressing; the 39 cases out of every 100,000 inhabitants registered in 1942 had gradually diminished from year to year until they were reduced to only 15 cases in 1952... according to M. Beddow Baylay, the English surgeon and medical historian." Slaughter of the Innocent, Hans Reusch, Civitas Publish ers, Switzerland, and Swain, New York, 1983.

29) "Many published stories and reports have stated, implied and otherwise led professional people and the public to believe that the sharp reduction of cases (and of deaths) from poliomyelitis in 1955 as compared to 1954 is attributable to the Salk vaccine...That it is a misconception follows from these considerations. The number of children inoculated has been too small to account for the decrease. The sharp decrease was apparent before the inoculations began or could take effect and was of the same order as the decrease following the immediate post-inoculation period." Dr. Herbert Ratner, Child and Family, vol. 20, no. 1, 1987.

30) "So far it is hardly possible to gain insight into the extent of the immunization catastrophe of 1955 in the United States. It may be considered certain that the officially ascertained 200 cases (of polio) which were caused directly or indirectly by the (polio) vaccination constitute minimum figures... It can hardly be estimated how many of the 1359 (polio) cases among vaccinated persons must be regarded as failures of the vaccine and how many of them were infected by the vaccine. A careful study of the epidemiologic course of polio in the United States yields indications of grave significance. In numerous states of the U.S.A., typical early epidemics developed with the immunizations in the spring of 1955...The vaccination incidents of the year 1955 cannot be exclusively traced back to the failure of one

manufacturing firm." Dr. Herbert Ratner, Child, and Family, 1980, vol. 19, no. 4, "Story of the Salk Vaccine (Part 2)."

31) "Suffice it to say that most of the large (polio) epidemics that have occurred in this country since the introduction of the Salk vaccine have followed the wide-scale use of the vaccine and have been characterized by an uncommon early seasonal onset. To name a few, there is the Massachusetts epidemic of 1955; the Chicago epidemic of 1956; and the Des Moines epidemic of 1959." Dr. Herbert Ratner, Child, and Family, 1980 vol. 19, no. 4.
32) "The live (Sabin) poliovirus vaccine has been the predominant cause of domestically arising cases of paralytic poliomyelitis in the United States since 1972. To avoid the occurrence of such cases, it would be necessary to discontinue the routine use of live poliovirus vaccine." Jonas Salk, Science, March 4, 1977, p. 845.
33) "By the (U.S.) government's own admission, there has been a 41% failure rate in persons who were previously vaccinated against the (measles) virus." Dr. Anthony Morris, John Chriss, BG Young, "Occurrence of Measles in Previously Vaccinated Individuals," 1979; presented at a meeting of the American Society for Microbiology at Fort Detrick, Maryland, April 27, 1979.
34) "Prior to the time doctors began giving rubella vaccinations, an estimated 85% of adults were naturally immune to the disease (for life). Because of immunization, the vast majority of women never acquire natural immunity (or lifetime protection)." Dr. Robert Mendelsohn, Let's Live, December 1983, as quoted by Carolyn Reuben in the LA WEEKLY, June 28, 1985.
35) "Administration of KMV (killed measles vaccine) apparently set in motion an aberrant immunologic response that not only failed to protect children against natural measles but resulted in heightened susceptibility." JAMA Aug. 22, 1980, vol. 244, p. 804, Vincent Fulginiti and Ray Helfer. The authors indicate that such falsely protected children can come down with "an often severe, atypical form of measles. Atypical measles is characterized by fever,

> headache... and a diverse rash (which)... may consist of a mixture of macules, papules, vesicles, and pustules... "

The above quotes reflect only a mere fraction of an available literature.

It is criminally deceiving to say, "Vaccines are simple; they stimulate the immune system and confer immunity against specific germ agents."

Official reports on vaccine reactions are often at odds with unofficial estimates because of the method of analysis used. If adverse vaccine-reaction is defined as a small set of possible effects experienced within 72 hours of an inoculation, then figures will be smaller. But doctors like G.T. Stewart, of the University of Glasgow, have found through meticulous investigation, including visits to hospitals and interviews with parents of children vaccinated, that reactions as severe as brain-damage (e.g., from the DPT vaccine) can be overlooked, go unreported and can be assumed to have come from other causes.

Well, that was my finding, in 1988, when I looked beneath the surface of the vaccine question.

Now we are in very deep waters. C 19 hysteria has been tuned up to the NEED for a vaccine.

WE need to slough off this promoted bad dream and stand firm against the little gods who traffic their vials in every doctor's office, hospital, school, drug store, and tented parking lot---making them into shooting galleries.

We already have natural immune systems. They work.

--Jon Rappoport

mRNA Vaccines Infused with Synthetic Nano Tech

mRNA Vaccines

mRNA vaccines have **ALLEGEDLY** elicited potent immunity against infectious disease targets in animal models of influenza virus, Zika virus, rabies virus and others, especially in recent years, using lipid-encapsulated or naked forms of sequence-optimized mRNA. This strategy literary changes the genetic code of the DNA in Epigenetic real time.

Epigenetics

Epigenetic changes alter the physical structure of DNA. One example of an epigenetic change is DNA methylation, the addition of a methyl group, or a "chemical cap," to part of the DNA molecule, which prevents certain genes from being expressed. n its modern sense, epigenetics is the term used to describe inheritance by mechanisms other than through the DNA sequence of genes. It works through chemical tags added to chromosomes that in effect switch genes on or off.

The mRNA vaccines, laden with synthetic nano tech, basically mimic the natural infection of the virus, but they contain only a short synthetic version of the viral mRNA which encodes only the antigen protein. Since the mRNA used in vaccination cannot become part of the person’s chromosomes, they are safe to use. Such mRNA vaccines would also be safer than the weakened viral or protein-based vaccines because they do not carry the risk of the injected virus becoming active, or a protein contamination.

Vaccine Nanotechnology

The present invention provides compositions and systems for delivery of nanocarriers to cells of the immune system. The invention provides vaccine nanocarriers capable of stimulating an immune response in T cells and/or B cells, in some embodiments, comprising at least one immunomodulatory agent,

and optionally comprising at last one targeting moiety and optionally at least one immunostimulatory agent. The invention provides pharmaceutical compositions comprising inventive vaccine nanocarriers. The present invention provides methods of designing, manufacturing, and using inventive vaccine nanocarriers and pharmaceutical compositions thereof. The invention provides methods of prophylaxis and/or treatment of diseases, disorders, and conditions comprising administering at least one inventive vaccine nanocarrier to a subject in need thereof.

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https://patents.google.com/patent/US9539210B2/en

Moderna Announces Positive Interim Phase 1 Data for its mRNA Vaccine (mRNA-1273) Against Novel CV

CAMBRIDGE, Mass.--(BUSINESS WIRE)--May 18, 2020-- Moderna, Inc., (Nasdaq: MRNA) a clinical stage biotechnology company pioneering messenger RNA (mRNA) therapeutics and vaccines to create a new generation of transformative medicines for patients, today announced positive interim clinical data of mRNA-1273, its vaccine candidate against novel CV (SARS-C 19-2), from the Phase 1 study led by the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health (NIH).

Immunogenicity data are currently available for the 25 μg and 100 μg dose level (ages 18-55) after two doses (day 43) and at the 250 μg level (ages 18-55) after one dose (day 29). Dose dependent increases in immunogenicity were seen across the three dose levels, and between prime and boost within the 25 μg and 100 μg dose levels. All participants ages 18-55 (n=15 per cohort) across all three dose levels seroconverted by day 15 after a single dose. At day 43, two weeks following the second dose, at the 25 μg dose level (n=15), levels of binding antibodies were at the levels seen in convalescent sera (blood samples from people who have reC 19ered from C 19) tested in the same assay. At day 43, at the 100 μg dose level (n=10), levels of binding antibodies significantly exceeded the levels seen in convalescent sera. Samples are not yet available for remaining participants.

-- https://investors.modernatx.com/news-releases/news-release-details/moderna-announces-positive-interim-phase-1-data-its-mrna-vaccine

What are RNA vaccines and how do they work?

Conventional vaccines usually contain inactivated disease-causing organisms or proteins made by the pathogen (antigens), which work by mimicking the infectious agent. They stimulate the body's immune response, so it is primed to respond more rapidly and effectively if exposed to the infectious agent in the future.

RNA vaccines use a different approach that takes advantage of the process that cells use to make proteins: cells use DNA as the template to make messenger RNA (mRNA) molecules, which are then translated to build proteins. An RNA vaccine consists of an mRNA strand that codes for a disease-specific antigen. Once the mRNA strand in the vaccine is inside the body's cells, the cells use the genetic information to produce the antigen. This antigen is then displayed on the cell surface, where it is recognized by the immune system.

-- https://www.phgfoundation.org/briefing/rna-vaccines

DNA Vaccines and Electroporation

DNA vaccines inject synthesized genes. The recipient's genetic makeup is altered PERMANENTLY in unknown ways. RNA vaccines carry the potential to trigger autoimmune reactions: the body attacks aspects of itself.

As if that weren't enough, there is another element deployed in DNA vaccines. It's called electroporation.

An online dictionary provides a definition: "the action or process of introducing DNA or chromosomes into bacteria or other cells [including human cells] using a pulse of electricity to briefly open the pores in the cell membranes."

A pioneer in this field is Dr. David Weiner. He is the co-founder of a San Diego company, Inovio Pharmaceuticals.

NBC San Diego, January 25, 2020: "A San Diego biotech company just received a $9 million grant to develop a vaccine for the CV. Inovio Pharmaceuticals received a grant from the Coalition for Epidemic Preparedness Innovations (CEPI)."

If Inovio wins a license to sell their version of a DNA CV vaccine, electroporation will undoubtedly be brought along as part of the technology.

Here is an excerpt from an article, "What you always needed to know about electroporation DNA vaccines," published in the journal, Human Vaccines and Immunotherapeutic, November 1, 2012: "…the cell membrane also needs to be in a permeabilized ["opened"] state in order to allow passage of the DNA molecule…[Electric] Pulses may be optimized to achieve either a greater degree of permeability of the cell membrane (for passive diffusion of drugs), or a greater degree of electrophoretic effect. As mentioned below, there are various ways to go about this, but generally a series of short high voltage pulses (e.g., 8 pulses of 0.1 ms at 1,000 V/cm voltage to electrode distance) is used for drug delivery, and a combination involving long low voltage pulses is used for DNA transfer [into human cells] (e.g., 1 pulse of 0.1 ms, 800 V/cm and 1 long pulse of 400 ms 80 V/cm).

In a nutshell, this means that human cells, whose membranes are "too tight" to allow DNA to be injected into them, will be "opened up" by electric pulses, in order to deliver the new type of vaccine

Apparently, it doesn't occur to the researchers that human cells may be as "tight" as they are for a reason; and forcing them open with electric pulses, in order to inject DNA, could have unforeseen effects.

Electroporation isn't the same kind of invasive action as, say, cutting into flesh to remove a bullet, during emergency surgery. The DNA vaccines, along with electric pulses, would be given to healthy people.

But as long as we think of ourselves as guinea pigs, willing to sit still for all sorts of medical experiments, what difference does it make? Genetic-altering vaccines, the body attacking itself, electroporation—if we surrender to the experts, and their assurances, I'm sure everything will be all right.

Right?

"Here's what we're doing. It's quite innovative. You see, with electric pulses, we briefly open up cells and inject DNA, synthesized genetic material, into them. Ordinarily, the cells would reject such an intrusion, but we get around that. Once the genetic material is inside cells, it mimics a virus, and the immune system responds, as if this were an actual viral disease. That's the vaccine effect. It's wonderful. Safe. Nothing dangerous could happen…"

--Jon Rappoport

Quarantine

Legal Authorities May Force You into Isolation and Quarantine

Page last reviewed: February 24, 2020, Content source: Centers for Disease Control and Prevention, National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Division of Global Migration and Quarantine (DGMQ)

Isolation and Quarantine

- Isolation and quarantine help protect the public by preventing exposure to people who have or may have a contagious disease.
- Isolation separates sick people with a quarantinable communicable disease from people who are not sick.

- Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.
- In addition to serving as medical functions, isolation and quarantine also are "police power" functions, derived from the right of the state to take action affecting individuals for the benefit of society.

Federal Law

The federal government derives its authority for isolation and quarantine from the Commerce Clause of the U.S. Constitution.

Under section 361 of the Public Health Service Act (42 U.S. Code § 264), the U.S. Secretary of Health and Human Services is authorized to take measures to prevent the entry and spread of communicable diseases from foreign countries into the United States and between states.

The authority for carrying out these functions on a daily basis has been delegated to the Centers for Disease Control and Prevention (CDC).

CDC's Role

Under 42 Code of Federal Regulations parts 70 and 71, CDC is authorized to detain, medically examine, and release persons arriving into the United States and traveling between states who are suspected of carrying these communicable diseases.

As part of its federal authority, CDC routinely monitors persons arriving at U.S. land border crossings and passengers and crew arriving at U.S. ports of entry for signs or symptoms of communicable diseases.

When alerted about an ill passenger or crew member by the pilot of a plane or captain of a ship, CDC may detain passengers and crew as necessary to investigate whether the cause of the illness on board is a communicable disease.

State, Local, and Tribal Law

States have police power functions to protect the health, safety, and welfare of persons within their borders. To control the spread of disease within their borders, states have laws to enforce the use of isolation and quarantine.

These laws can vary from state to state and can be specific or broad. In some states, local health authorities implement state law. In most states, breaking a quarantine order is a criminal misdemeanor.

Tribes also have police power authority to take actions that promote the health, safety, and welfare of their own tribal members. Tribal health authorities may enforce their own isolation and quarantine laws within tribal lands, if such laws exist.

Who Is in Charge

The federal government

- Acts to prevent the entry of communicable diseases into the United States. Quarantine and isolation may be used at U.S. ports of entry.
- Is authorized to take measures to prevent the spread of communicable diseases between states.
- May accept state and local assistance in enforcing federal quarantine.
- May assist state and local authorities in preventing the spread of communicable diseases.
- State, local, and tribal authorities
- Enforce isolation and quarantine within their borders.

It is possible for federal, state, local, and tribal health authorities to have and use all at the same time separate but coexisting legal quarantine power in certain events. In the event of a conflict, federal law is supreme.

Enforcement

If a quarantinable disease is suspected or identified, CDC may issue a federal isolation or quarantine order.

Public health authorities at the federal, state, local, and tribal levels may sometimes seek help from police or other law enforcement officers to enforce a public health order.

U.S. Customs and Border Protection and U.S. Coast Guard officers are authorized to help enforce federal quarantine orders.

Breaking a federal quarantine order is punishable by fines and imprisonment.

Federal law allows the conditional release of persons from quarantine if they comply with medical monitoring and surveillance.

In the rare event that a federal order is issued by CDC, those individuals will be provided with an order for quarantine or isolation. An example of a Quarantine Order for Novel CV (print-only) pdf icon[PDF – 5 pages] is provided. This document outlines the rationale of the federal order as well as information on where the individual will be located, quarantine requirements including the length of the order, CDC's legal authority, and information outlining what the individual can expect while under federal order.

--https://www.cdc.gov/quarantine/aboutlawsregulationsquarantineisolation.html

Chapter 10

C 19 and Climate Change Eugenics Projects

Repackaging the Eugenics Project as C 19

Before the C 19 Eugenics Project was launched by Club of Rome puppet Bill Gates, the Climate Change Hoax was implemented by The Club of Rome to manipulate the world into economic submission. It did not work, largely due to its ludicrous propositions and unsupported and unscientific claims, and so the Club of Rome created an Invisible Enemy in the form of a super virus to succeed where Climate Change had failed. Now that virus fear has spread worldwide so well, they can easily backtrack and swoop up the previously failed Climate Change Agenda to assert that:

"Through the worldwide lockdown, less people have been driving, thereby decreasing our Carbon Footprint, and less people have been polluting the environment by working, and so we want the "new normal" to be lockdown and unemployment…to save the environment and save GAIA, our beloved Mother Earth."

Of course, this is all being processed through the conduit of the Luciferian Eugenics Philosophy of The United Nations, which is the vile and lethal stepchild of the Club of Rome, both parent and stepchild subservient to the goals and admonishments of Lucis Trust Publications.

The Club of Rome, the Climate Change Hoax, and Eugenics

"***The common enemy of humanity is man.***
In searching for a new enemy to unite us, ***we came up***
with the idea that pollution, the threat of global warming*,*
water shortages, famine and the like would fit the bill. All these
dangers are caused by human intervention, and it is only through
changed attitudes and behavior that they can be overcome.
The real enemy then, is humanity itself."

– Club Of Rome, Consultants To The United Nations

"*The Earth has cancer and the cancer is Man.*"

– Club of Rome, Mankind at the Turning Point

"*The greatest hope for the Earth lies in* ***religionists and***
scientists uniting to awaken the world *to its near fatal predicament*
and then leading mankind out of the bewildering maze of
international crises into the future Utopia of humanist hope."

– Club of Rome, Goals for Mankind

"*In Nature organic growth proceeds according*
to a Master Plan, a Blueprint. Such a 'master plan' is
missing from the process of growth and development of

the world system. Now is the time to draw up a master plan for ***sustainable growth*** *and world development based on global allocation of all resources and a* ***new global economic system****. Ten or twenty years form today it will probably be too late."*

– Club of Rome, Mankind at the Turning Point

*"****Democracy is not a panacea****. It cannot organize everything and it is unaware of its own limits. These facts must be faced squarely. Sacrilegious though this may sound,* ***democracy is no longer well suited for the tasks ahead****. The complexity and the technical nature of many of today's problems do not always allow elected representatives to make competent decisions at the right time."*

– Club of Rome, The First Global Revolution

"A keen and anxious awareness is evolving to suggest that fundamental changes will have to take place in the world order and its power structures, in the ***distribution of wealth and income.*** *Perhaps only a new and enlightened humanism can permit mankind to negotiate this transition."*

– Club of Rome, Mankind at the Turning Point

"… *the resultant ideal* ***sustainable*** *population is hence more than 500 million but less than one billion*."

– Club of Rome, Goals for Mankind

What is the Club of Rome?

The organization was founded in 1968 by global elite kingpin David Rockefeller and counts amongst its members some of the most influential power brokers on the planet, including current and former Heads of State, UN bureaucrats , high-level politicians and government officials, diplomats, scientists, economists, and business leaders from around the globe.

The Club of Rome's 1972 publication The Limits To Growth was a Malthusian blueprint on how the human population needed to be reduced in order to prevent an ecological collapse, which in itself was merely a disguised version of the abhorrent eugenicist ideas that were circulating in the early part of the 20th century and eventually died out with Hitler. The widely discredited population bomb paranoia of the 70's and 80's was gradually replaced by the climate change fearmongering that we see the organization pushing today, which again is merely another regurgitation of the eugenics-obsessed policies of the elite.

Prominent members of the Club of Rome include Al Gore and Maurice Strong, both of whom are intimately involved with privately-owned carbon trading groups like the Chicago Climate Exchange, whose multi-million dollar profits are solely reliant on protecting the credibility of the man-made global warming thesis from skeptics who have challenged its legitimacy in light of the Climategate scandal.

On page 75 of their 1990 publication entitled The First Global Revolution, the organization outlined how they would manufacture ecological scares in order to manipulate the public into accepting the imposition of a dictatorial world government run by them.

"In searching for a common enemy against whom we can unite, we came up with the idea that pollution, the threat of global warming, water shortages, famine and the like would fit the bill…. All these dangers are caused

by human intervention… The real enemy, then, is humanity itself," states the report.

The passage appears under a subheading entitled, "The common enemy of humanity is Man."

Of course, to unite the public against a common enemy, by using divide and conquer to turn humanity against itself, villains need to be created in the public eye who can be blamed for slowing efforts to save the planet from the mythical threat of global warming, even as Arctic ice levels return to normal and much of the globe has just experienced its coldest winter in decades.

With global warmists despondent at the fact that reality hasn't backed up their increasingly fanatical predictions, and with public opinion increasingly turning against them, they're simply pushing ahead anyway with the agenda to impose authoritarian control measures to regulate and tax every aspect of our existence.

--https://climaterealists.org.nz/node/878

Looking Behind the Scenes of The Well-Orchestrated Climate Hysteria

We know there is simply no basis for climate alarm. All "scientific" predictions have failed, life has survived happily with much higher CO2 in the past, the medieval warming period a thousand years ago was much warmer than today, the small temperature variations of the 20th century are easily explained by natural causes, and the IPCC reports confirm that there is no increase in extreme weather events and no economic harm from CO2.

And yet the hysteria is increasing by the day. The "remedies" being suggested are becoming more extreme: it is no longer just about making energy so expensive that the poor can't afford it, it is now about removing meat from their diet as well.

So how is such an irrational project going so strong? Because it is a clever way to disguise the deep hatred so many of the elites have of the poor. After the Hitler debacle talking about eugenics is no longer welcome in polite company. Climate alarm provides a perfect cloak. It achieves the same goal while signaling virtue. Climate hysteria is driven by an amalgamation of the ideologies of Malthus, Marx, Hitler and social Darwinism.

That this is not about the environment becomes clear when we note that these people do not care about market-based remedies to save wildlife, remove waste and reduce chemical pollution. These people also viciously attack nuclear energy. If they cared about CO2, they would be desperate for nuclear energy, but their goals are obviously quite different.

Stephen Schneider, a key "scientist" in the climate alarm bandwagon explained how their "goals" are to be achieved. In a 1989 interview he said that "to reduce the risk of potentially disastrous climatic change" scientists "need to … capture the public's imagination" by "getting loads of media C 19erage. So we have to offer up scary scenarios, make simplified, dramatic statements, and make little mention of any doubts we might have". Straight from the Goebbels copybook.

Malthus is the father of this anti-poor ideology. Over 200 years ago he attacked the poor even though the world's population was a tiny fraction of what it is today. After Hitler's eugenic project left a permanent stink, the Club of Rome revived the idea under the guise of "optimal population". Its goal: to cut the world's population at least by two-third. A related 1980 "Global 2000 Report" wanted US population to be reduced by 100 million by 2050.

This has never been about reducing just any population. It has a specific goal to protect first the "white" rich and then a few of the other rich, while eliminating the poor, blacks and Indians.

Margaret Sanger's goal was to "stop the multiplication of the unfit … the most important … step towards race betterment" (note the focus on "race"). She wanted the "bloodstream of the (white) race" to be as pure as possible. She

was involved in a 'Negro Project' to limit, if not eliminate, black births. She also detested Indians, considering India's population (then only 300 million) a "curse".

Nothing would have pleased her more than the total wipe-out of all Indians. When she learnt that Nehru had agreed to her persistent proposal to start a birth control program in India, she was delighted: "I cannot imagine anything more blessed happening on earth". In the minds of such monsters, it will be truly "blessed" when all of us Indians are wiped out.

Rachel Carson was the next prominent Malthusian. Her book, Silent Spring (1962) actively fought technologies that could improve the lives of the poor. She lied through her teeth about DDT and tried to stop it from being used to fight malaria which kills millions of poor Indians and Africans.

Next came Paul Ehrlich with his 1968 book, The Population Bomb. His hatred for humanity was revealed in the title itself. Not chastened by the total failure of all his predictions, he gloated in an interview in 2014 about the prospect that things could go so bad that humans will become cannibals. Nothing would please him more than the poor eating each other.

The specific issue of climate alarm originated as part of the Club of Rome of 1968 and its 1973 Limits of Growth report. One of the Club of Rome associates was a wealthy businessman, Maurice Strong who played a particularly insidious role in drumming up a range of anti-poor hysterias.

The Club of Rome's influence led to the establishment of the United Nations Environment Program which elected Maurice Strong as its head. Even though major climate scientists of the time were squealing about an impending Ice Age, he picked CO2 warming as his vehicle. After all, the best way to crush the poor is to choke their fossil fuel use.

He therefore drove the Action Plan for the Human Environment at Stockholm and Agenda 21 at Rio. This included the infamous Rio precautionary principle which underpins all anti-poor policy.

He had a revulsion for people. In his 2000 autobiography he dreamt of the day when two-thirds of the world's population might be wiped out. A committed socialist, he outlined the plot for novel in a 1992 interview in which: "Isn't the only hope for the planet that the industrialized civilizations collapse? Isn't it our responsibility to bring that about?".

Strong was widely supported by thousands of influential like-minded people, many of whom are extremely powerful today: for instance, William Nordhaus, who received the Nobel prize in economics last year. In a major 1974 article Nordhaus cited the Club of Rome and said its concerns about "the carrying capacity of the environment" are legitimate and the concept of economic growth itself needs to be reviewed. He then started a life-long focus on CO2 and has long recommended a carbon tax without ever bothering to check whether CO2 is actually a pollutant.

The Club of Rome and its associate organizations remain active and operate behind the scenes. There is a powerful network of people determined to use climate alarm and anti-GM propaganda as instruments to curb agricultural productivity and choke energy use by the poor. Al Gore is perhaps the most well-known, but the group includes innumerable "scientists" who are happy to fudge data. The Climategate emails demonstrate how these "scientists" operate in the shadows to distort facts and mislead the public.

-- https://timesofindia.indiatimes.com/blogs/toi-edit-page/looking-behind-the-scenes-of-the-well-orchestrated-climate-hysteria

Population Control and Eugenics: The Blueprint for the Club of Rome

Contrary to popular belief, the original architect of China's policies was neither Mao Zedong in a power-drunk whim nor a Party-sadist hatching eugenics in some sub-level torture chamber. According to anthropologist Susan Greenhalgh in her study 'Just One Child: Science and Policy in Deng's China'

the inspiration for the tyrannical move by the Chinese Communist Party was inspired first and foremost by the Club of Rome. In the early seventies, a group of Chinese scientists visited several scientific conferences in Europe, and readily picked up on the ideas distributed by the Club of Rome. At the head of this Chinese delegation was a man credited for introducing China's notorious one-child policies, source of so much hardship suffered by the Chinese people in the last decades.

Greenhalgh points out that the infamous policy "had roots in missile scientists' exposure to and import of Club of Rome population concepts through international conferences in the 1970s." The 'missile scientists' Greenhalgh mentions, are Dr. Song Jian and company, visiting several conferences in Europe in the 1970s designed to further the glory and prestige of the People's Republic of China around the world. They picked up and further developed several methods to calculate population rates on blueprint models used by the Club of Rome to calculate their scams into creation.

The fact that the Club of Rome stands at the cradle of one-child policies may not come as a complete surprise to those who have read all the policy-papers issued from the seventies onward. The same Malthusian idea that triggered our current green movement and its obsession with man-made global warming mythology once inspired hardcore involuntary sterilization policies in the decades preceding World War II. In order to force a rising death rate into being one needs to create "a common motivation, namely a common adversary, to organize and act together in a vacuum; such a motivation must be found to bring the divided nations together to face an outside enemy, either a real one or else one invented for the purpose."

In the 1991 publication "The First Global Revolution: A Report to the Club of Rome" by Alexander King and Bertrand Schneider, the common denominator that the world would need to rally around was identified in all clarity: "In searching for a new enemy to unite us, we came up with the idea that pollution, the threat of global warming, water shortages, famine and the like would fit the bill. All these dangers are caused by human intervention, and

it is only through changed attitudes and behavior that they can be overcome. The real enemy then, is humanity itself."

This contrived and purposeful enemy arrived in the shape of man-made global warming. And to think that all of us gullible gadgets were fooled into believing that any climate change was caused by that big lamp in the sky, determining not just earth's overall temperatures but those of all planets in the solar system. It just goes to show that the scam is perpetrated on such an unprecedented scale, that few dare question its validity. The entire thing of course boils down to the old Nazi proverb: the bigger the lie, the easier the sell.

--https://destination-yisrael.biblesearchers.com/destination-yisrael/2010/02/population-control-and-eugenics-the-blueprint-for-the-club-of-rome-part-two.html

Prime Minister Nikita Khrushchev Warns of the Incremental Spread of Communism in America

Anyone who is younger than 60 years old should be aware of what former Soviet Prime Minister Nikita Khrushchev said during an address to the United Nations in 1959:

"Your children's children will live under communism. You Americans are so gullible. No, you won't accept communism outright; but we will keep feeding you small doses of socialism until you will finally wake up and find you already have Communism. We will not have to fight you. We will so weaken your economy, until you will fall like overripe fruit into our hands. The democracy will cease to exist when you take away from those who are willing to work and give to those who would not"

It was September 29, 1959, when Nikita Khrushchev delivered his prediction for America at the United Nations. At that time, just the word "communism" was feared throughout our nation. Remember this. Socialism leads to Communism How do you create a Socialist State?

There are eight levels of control:

1) Healthcare - Control healthcare and you control the people

2) Poverty - Increase the poverty level as high as possible, poor people are easier to control and will not fight back if you are providing everything for them.

3) Debt - Increase the debt to an unsustainable level. That way you are able to increase taxes, and this will produce more poverty.

4) Gun Control - Remove the ability to defend themselves from the government . That way you are able to create a police state.

5) Welfare - Take control of every aspect (food, housing, income) of their lives because that will make them fully dependent on the government.

6) Education - Take control of what people read, listen to and take control of what children learn in school.

7) Religion - Remove the belief in God from the government and schools because the people need to believe in ONLY the government knowing what is best for the people.

8)Class Warfare - Divide the people into the wealthy and the poor. Eliminate the middle class. This will cause more discontent and it will be easier to tax the rich with the support of the poor.

How many of those goals have already been achieved in America?

About the Author

Gregory L. Garrett lives in California in the USA, has a B.S. in Music and a B.A. in Psychology from UCLA and UCSC, a Masters in Education from National University, studied Physics and Philosophy at UCLA, and Advanced Astrophysics at UCSC under Frank Drake, and is a musical theater composer, songwriter, author, martial artist, classical symphonic rock keyboardist and performer, and is currently working on a book about Transhumanism, Nano Synthetic Biology, Consciousness Uploading, Artificial General Intelligence, and The Elite Agenda for Apotheosis.